

## Spring 2010 Graduates Only

### MBA STUDENTS

**Preliminary Graduation Check & Application:** If you want to make sure that you have met the requirements to graduate.

- Return the completed application (green front page and application) to the Office of Graduate Studies, BSN 103, **prior to December 4<sup>th</sup>**.
- Please note that you must have your spring schedule in order for us to complete a graduation check.
- All **confirmations** for preliminary graduation checks will be sent via e-mail.

**Graduation Application:** (Only if you haven't submitted a preliminary graduation check & application)

- If you have **not** submitted a preliminary Graduation Application, return the completed application (front page and application) to the Office of Graduate Studies, BSN 103, **prior to January 29<sup>th</sup>**. (**Absolute deadline**)

**Commencement:** You may visit the commencement website at [www.usf.edu/commencement](http://www.usf.edu/commencement) in order to sign-up and for information on the commencement ceremony. The spring Tampa campus commencement date is May 8<sup>th</sup>.

**Diploma:** The office of registrar will mail your diploma to you approximately one month after graduation.

- You can enter your diploma address when you sign-up for commencement.
- You can also update your diploma address through OASIS.

In addition, you will be asked to complete an online MBA Career Placement Profile. This profile must be completed during the last two weeks of your final semester. You will receive an e-mail with the survey link two weeks prior to graduation. If you do not receive an e-mail, please contact Megan Newman: [mhendric@coba.usf.edu](mailto:mhendric@coba.usf.edu)



# MBA Student Graduation Check

Name: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Courses in Tool Area completed satisfactorily? Yes \_\_\_\_\_ No \_\_\_\_\_ or Waived \_\_\_\_\_

Please list below the courses you are enrolled in this semester and the courses you plan to enroll in next semester. (By number & title)

Current Semester	Next Semester
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____

List below the tracks and courses you plan to complete. (Courses by number & title)

Track #1 (required) \_\_\_\_\_  
 #1 \_\_\_\_\_  
 #2 \_\_\_\_\_  
 #3 \_\_\_\_\_

Track #2 (required) \_\_\_\_\_  
 #1 \_\_\_\_\_  
 #2 \_\_\_\_\_  
 #3 \_\_\_\_\_

Track #3 (optional) \_\_\_\_\_  
 #1 \_\_\_\_\_  
 #2 \_\_\_\_\_  
 #3 \_\_\_\_\_

Check the four subject areas that were completed for the breadth requirement: (35 credit hour program students only)

Accounting _____	Information Systems _____
Economics _____	Marketing _____
Finance _____	Management _____
Decision Science _____	GEB (Not GEB 6445, 6895, 6896) _____

Have you completed the following required courses? If not, when do you plan to take them?

Social, Ethical & Legal Systems \_\_\_\_\_  
 Integrated Business Applications I \_\_\_\_\_  
 Integrated Business Applications II \_\_\_\_\_

Please remember the following:

- Coursework must be completed within the five-year time limit.
- Total number of hours required must be completed.
- Minimum of a 3.0 GPA is required to graduate.
- Independent study reports must be turned in.
- "I" grades must be completed before graduation.
- All grades must be a C or higher for credit (C- does not count for credit)
- Students may not take more than five (5) electives in any functional area
- Must be enrolled at USF in semester of graduation

**STUDENTS ARE RESPONSIBLE FOR MEETING ALL GRADUATION REQUIREMENTS.**

If you have any questions, please call the Office of Graduate Studies at (813) 974-3335.

# APPLICATION FOR GRADUATE DEGREE

College Stamp \_\_\_\_\_

Complete numbers 1 – 12. Print this page. Sign the application and submit to your college advising office by the deadline to apply. Locations and contact numbers may be found at [www.registrar.usf.edu/graduation](http://www.registrar.usf.edu/graduation).

1. Student ID: U Degree Term: Fall \_\_\_ Spring  Summer \_\_\_ Year 2010

2. Print your name as you wish it on your diploma. Please indicate upper/lower case letters, accents and punctuation. This name must be consistent with USF student records. A Change of Name Form with substantiating documents must be completed and attached if this name is other than USF student records.

\_\_\_\_\_

3. Mail diploma to:

\_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

4. Degree you are applying for:

- |  |                                   |                                     |                                   |
|--|-----------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Ed.S.             | <input type="checkbox"/> M.C.H.E. | <input type="checkbox"/> M.P.H.     | <input type="checkbox"/> M.S.E.S. |
| <input type="checkbox"/> A.u.D.            | <input type="checkbox"/> M.C.E.   | <input type="checkbox"/> M.S.       | <input type="checkbox"/> M.S.E.V. |
| <input type="checkbox"/> Ed.D.             | <input type="checkbox"/> M.E.D.   | <input type="checkbox"/> M.S.B.     | <input type="checkbox"/> M.S.I.E. |
| <input type="checkbox"/> Ph.D.             | <input type="checkbox"/> M.E.     | <input type="checkbox"/> M.S.B.C.B. | <input type="checkbox"/> M.S.M.   |
| <input type="checkbox"/> D.N.P.            | <input type="checkbox"/> M.E.V.E. | <input type="checkbox"/> M.S.B.E.   | <input type="checkbox"/> M.S.M.E. |
|  | <input type="checkbox"/> M.F.A.   | <input type="checkbox"/> M.S.C.H.   | <input type="checkbox"/> M.S.M.S. |
| <input type="checkbox"/> M.A.C.C.          | <input type="checkbox"/> M.H.A.   | <input type="checkbox"/> M.S.C.E.   | <input type="checkbox"/> M.S.P.H. |
| <input type="checkbox"/> M.A.R.C.          | <input type="checkbox"/> M.I.E.   | <input type="checkbox"/> M.S.C.P.   | <input type="checkbox"/> M.S.W.   |
| <input type="checkbox"/> M.A.              | <input type="checkbox"/> M.L.A.   | <input type="checkbox"/> M.S.C.S.   | <input type="checkbox"/> Other    |
| <input type="checkbox"/> M.A.B.M.H.        | <input type="checkbox"/> M.M.E.   | <input type="checkbox"/> M.S.E.E.   |                                   |
| <input type="checkbox"/> M.A.T.            | <input type="checkbox"/> M.M.     | <input type="checkbox"/> M.S.E.     |                                   |
| <input checked="" type="checkbox"/> M.B.A. | <input type="checkbox"/> M.P.A.   | <input type="checkbox"/> M.S.E.M.   |                                   |

5. College of your major: BA Major(s): BUS

6. Concentration(s): \_\_\_\_\_

7. Indicate last term enrolled for this degree: \_\_\_\_\_ Thesis/Dissertation Required? Yes  No

8. Are you in a five year program (seeking bachelor and master degrees simultaneously)? Yes  No

9. Do you expect to meet teacher certification requirements? Yes  No

10. Graduation Date: (month) May (Year) 2010  
(Student Signature) \_\_\_\_\_ (Date)

11. Local Address for Contact: \_\_\_\_\_

12. E-Mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

## DO NOT WRITE BELOW THIS LINE. REGISTRAR OFFICE USE ONLY

Degree Term \_\_\_\_\_ Degree Level \_\_\_\_\_ Degree Code \_\_\_\_\_ Sequence No. \_\_\_\_\_

College 1 Code \_\_\_\_\_ Major 1 Code \_\_\_\_\_ Concentration(s) \_\_\_\_\_

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_