

PETITION TO GRADUATE SCHOOL OF NURSING & HEALTH SCIENCES

Students must return a completed Petition to Graduate form to the **SNHS Dean's Office (Room S-340)** for signature before the appropriate deadline indicated below. Students can also email a scanned petition to snhsonline@simmons.edu, but no cell phone photos please. *Incomplete petitions will be returned to the student.* Petitions received by SNHS *after* the deadline, or filled out with the incorrect graduation date, may result in a postponed graduation date or the student's name being left out of the commencement program.

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DIPLOMA NAME:

Please print your name EXACTLY as you wish it to appear on your diploma.

First Middle Last

Degree: *Please check degree you are receiving.*

- | | |
|--|--|
| <input type="checkbox"/> Doctor of Nursing Practice
<input type="checkbox"/> Doctor of Philosophy
<input type="checkbox"/> Doctor of Physical Therapy
<input type="checkbox"/> M.S. in Nursing
<input type="checkbox"/> M.S. in Nursing Administration
<input type="checkbox"/> Certificate of Advanced Graduate Study (CAGS) in Health Professions Education
<input type="checkbox"/> Certificate of Advanced Graduate Study (CAGS) in Nursing
<input type="checkbox"/> Dual degree in _____ & _____ | <input type="checkbox"/> M.S. in Nutrition and Health Promotion
<input type="checkbox"/> Certificate of Didactic Program in Dietetics (DPD)
<input type="checkbox"/> Certificate in Nutrition (Internship)
<input type="checkbox"/> Certificate in Sports Nutrition |
|--|--|

Conferral Date: *Please check one.*

- | | |
|---------------------------------------|-----------------------------|
| <input type="checkbox"/> January 2017 | Petition due by November 1. |
| <input type="checkbox"/> May 2017 | Petition due by November 1. |
| <input type="checkbox"/> August 2017 | Petition due by April 1. |
| <input type="checkbox"/> October 2017 | Petition due by April 1. |

Diplomas will not be ordered for students who don't return completed petitions. Late petitions may delay the availability of your diploma.

Previous Degrees Earned:

College: _____ Degree: _____ *(B.A., B.S., M.A., etc.)*
 College: _____ Degree: _____

Commencement:

Students who will finish their degree requirements by May 2017 are invited to participate in the commencement ceremony on May 19, 2017.

Graduate students in the School of Nursing and Health Sciences who will not finish their requirements by May, but can demonstrate that their degree will be completed **no later than October of that year**, are allowed to participate in the Commencement ceremony in May if they have the approval of their program and the Office of the Registrar. If approved to participate, students finishing up over the summer (1) will not receive their diplomas until all degree requirements are complete, including credits, (2) will have a notation next to their names in the commencement program indicating they will not be finished until later in the academic year, (3) will be responsible for communicating with the Office of the Registrar and their academic program before June 30 about the completion of their degrees, to make certain that they are included on the appropriate August or October graduation list, and (4) must also submit a completed Petition to Participate form that can be downloaded at <http://commencement.simmons.edu/participate>.

Do you plan to attend the Commencement ceremony on Friday, May 19, 2017? Yes No

Diplomas:

Diplomas may be picked up at Commencement 2017 or in the Office of the Registrar *two business days* after Commencement; a photo ID is required to pick up your diploma. For January, August and October graduates, diplomas will be mailed to you directly from our printing company **to the Preferred Mailing Address that we have on record for you on your Manage Contact/Emergency Info page in AARC. Please update your address on AARC when you submit your petition**, to ensure that your diploma is sent to the correct place. Replacement diplomas cost \$25, and should be requested in writing from the Office of the Registrar, Simmons College, 300 The Fenway, Boston, 02115.

Student signature: _____ ID # or S.S. #: _____

Program Director approval: _____ Date: _____