



SIMMONS UNIVERSITY

Office of the Registrar  
300 The Fenway, Boston, MA 02115  
Tel 617.521.2111 Fax 617-521.3144  
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**DUAL DEGREE AWARD DETACHMENT**

Student should complete this form to petition for different conferral dates for the degrees in LIS Archives and History. Students completing this form must have completed all the requirements for one program and made significant progress in the other.

To ensure that all records are up to date, Simmons requires students to obtain the permission of both program directors involved in the dual degree.

Students not intending to complete both halves of a dual-degree program should not use this form.

Student Name: \_\_\_\_\_ Simmons I.D.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Intended conferral date of Archives Degree (MSLIS):  May/Year \_\_\_\_\_  
 August/Year \_\_\_\_\_  
 October/Year \_\_\_\_\_  
 January/Year \_\_\_\_\_

Intended conferral date of History Degree (MA):  May/Year \_\_\_\_\_  
 August/Year \_\_\_\_\_  
 October/Year \_\_\_\_\_  
 January/Year \_\_\_\_\_

**Signatures:**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

LIS Archives Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

History Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Student Financial Services Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to the Office of the Registrar.