



CARDINAL STRITCH  
UNIVERSITY

**APPLICATION FOR DIPLOMA  
COLLEGE OF BUSINESS AND MANAGEMENT  
MASTERS DEGREES**

This form must be completed even if not participating in a graduation ceremony.

YEAR OF GRADUATION \_\_\_\_\_

Please check one degree granting month:

\_\_\_\_ **May** (Applications must be postmarked by March 1.)

\_\_\_\_ **August** (Applications must be postmarked by August 15.)

\_\_\_\_ **December** (Applications must be postmarked by October 1.)

Note: All coursework and degree requirements must be completed by the graduation date.

Please check the degree and accompanying major you are applying for:

\_\_\_\_\_ **Master of Business Administration**

\_\_\_\_\_ Business Administration

Concentration, if any: \_\_\_\_\_

\_\_\_\_\_ **Master of Science**

\_\_\_\_\_ Management

Cardinal Stritch University ID Number \_\_\_\_\_

Please print your legal name as it is to appear on your diploma.

\_\_\_\_\_  
(First) (Middle Name or Initial) (Last)

Address, Street, Apt #: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Personal Email Address: \_\_\_\_\_

**Hometown Information**—This information will be used in the commencement program. If you choose not to fill out this information, we will list your current city and state as your hometown.

Hometown City: \_\_\_\_\_ Hometown State: \_\_\_\_\_ If International, Country: \_\_\_\_\_

**PLEASE NOTE:** If you find that you will not be eligible for graduation, please notify the Registrar’s Office in writing. You must reapply by completing a new form and submitting it by the appropriate deadline for your new anticipated graduation date.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

**You do not need to send any fees with this application.** Please call the Registrar’s Office at (414) 410-4081 or 1-800-347-8822 Ext 4081 to verify receipt of your application. Additional information will be sent to you after the application deadline.

Return by mail to: Registrar’s Office, Cardinal Stritch University, 6801 N Yates Rd, Milwaukee WI 53217  
or fax to: 414-410-4099  
or email as a scanned attachment to: [registrar@stritch.edu](mailto:registrar@stritch.edu)