

# ROCKFORD COLLEGE

## MASTER OF BUSINESS ADMINISTRATION APPLICATION FOR DEGREE COMPLETION

This form is **required** and must be on file with the Graduate Office at the time your Application for Graduation is filed (or within 5 days thereafter). This application should be completed, signed, and submitted to the Graduate Office when the MBA student has completed 27 hours of required coursework (before registering for your last nine hours).

Name \_\_\_\_\_  
Last First Middle E-mail Power Campus I.D.

Address \_\_\_\_\_  
Street City State Zip Phone

### Anticipated Graduation Date:

Hours Completed: \_\_\_\_\_ Fall \_\_\_\_\_

Current GPA: \_\_\_\_\_ Spring \_\_\_\_\_

Hours Remaining: \_\_\_\_\_ Summer \_\_\_\_\_

### Degree:

\_\_\_ MBA

\_\_\_ MBA/CPA

\_\_\_ MBA/Non-Profit

Concentration \_\_\_\_\_

Please list your remaining courses and indicate the semester(s) in which you plan to complete them. It is suggested that you discuss tentatively scheduled course offerings with your advisor.

\_\_\_\_\_ Hours Fall/Spring/Summer \_\_\_\_\_  
Course No. and Title

\_\_\_\_\_ Hours Fall/Spring/Summer \_\_\_\_\_  
Course No. and Title

\_\_\_\_\_ Hours Fall/Spring/Summer \_\_\_\_\_  
Course No. and Title

Please sign below. Upon successful completion of these courses, all requirements for the MBA degree will have been met.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director, MBA Program

\_\_\_\_\_  
Date