

Master’s Diploma Form

Note: This form is required when a program of study is submitted for the Master’s degree.

***TYPE your name clearly using upper and lower case lettering (do not use all capitals), and include accent marks as desired.***

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| Student Name (as desired on diploma): | Enter text. |
|  |  |
| URID: | Enter text. |
|  |  |
| Degree Type: | Choose an item. |
|  |  |
| Program Name: | Choose an item. |
|  |  |
| Non-UR E-mail Address: | Enter text. |

Address for the May Master’s Commencement ceremony mailings. If unknown, provide a permanent mailing address.

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| Enter text. |

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| Have you already secured employment or been admitted for further graduate study? | Choose an item. |
| If Yes, please tell us about your post-graduate plans. |  |
| * + Employer/University Name:
 | Enter text. |
| * Job/Opportunity Title:
 | Enter text. |
| * + Start Date:
 | Enter text. |
| * + Business City:
 | Enter text. | State: | Enter text. |
| * + Business Country:
 | Enter text. |
| * + Please tell us about your long-term plans:
 | Enter text. |

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| Student Mentoring: Upon graduation, would you be willing to connect with current students to provide mentorship and career advice? | Choose an item. |
| (Responding "Yes" to this question does NOT commit you to becoming a mentor.) |  |
|  |  |
| Do you utilize LinkedIn? If yes, please share link:  | Enter text. |
|  |  |
| Do you have a Meliora Collective Profile?  | Choose an item. |
| If no, would you be interested in learning more about The Meliora Collective and connecting with current U of R alumni, current students, and future students?  | Choose an item. |

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_