

Appeal to Walk Early at Commencement



Graduation Office
700 East Seventh Street
Saint Paul, Minnesota 55106-5000
E-mail: graduation@metrostate.edu
Phone: 651-793-1231

Who needs to use this form?

Metropolitan State University encourages graduates to participate in the commencement ceremony for the term in which they are officially graduating.

This form is for students who are not officially graduating this semester but want to participate in the upcoming Commencement ceremony for extreme circumstances.

Examples include medical reasons, leaving the country, etc. Complete Sections 1, 2 and 3.

Important Notes

- Only a limited number of appeals will be approved each semester, based on your explanation and available space.
- You will be notified via e-mail within 10 working days of submittal to notify you if your appeal has been approved or declined.
- **Deadlines:**
Fall Commencement: October 1
Spring Commencement: February 14

How to Submit

Submit the completed form to both the Graduation Office and your academic advisor.

If you are an international student, you must also submit the form to Kamal Elbasher in International Student Services.

Section 1: Student Information

Student Name: _____
Last *First* *Middle Initial*

Metropolitan State student ID: _____ Metropolitan State e-mail address: _____@go.metrostate.edu

Degree Program: _____ Major: _____ Semester of Graduation: _____*

* Applications will be considered for the commencement immediately prior to the actual degree completion.

Section 2: Explanation

Please explain your rationale for why an exception should be made on your behalf. If possible please attach documentation indicating your rationale, such as your student visa or medical documentation:

Section 3: Signature

Signature: _____ * Date: ____ / ____ / ____
MM DD YYYY

*If you submit this form from your Metropolitan State University e-mail, signature is not required.

Section 4: Office Use Only

Approved Declined

Explanation: _____

Graduation Signature: _____ Date: ____ / ____ / ____

Academic Advisor Signature: _____ Date: ____ / ____ / ____

Academic Advisor Signature: _____ Date: ____ / ____ / ____