



# Medical College of Wisconsin GRADUATE SCHOOL OF BIOMEDICAL SCIENCES

## Master of Arts Non-Thesis Final Degree Checklist

In anticipation of completing final degree requirements the following are to be sent to:

Director of Enrollment  
Graduate School of Biomedical Sciences  
PO Box 26509  
8701 Watertown Plank Rd.  
Milwaukee, Wisconsin 53226-0509

CANDIDATE NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

DATE: \_\_\_\_\_

\_\_\_\_ Intent to Graduate Form, with Photos, and fee **DUE 6 months before degree completion**

\_\_\_\_ Graduation fee \$50.00

\_\_\_\_ Contact the Director of Enrollment @ 414-955-8218 to review transcript and completion of course/degree requirements. Note: **You are responsible to initiate contact with the Director of Enrollment.**

**You are responsible for all travel arrangements and costs associated with participation in commencement. In the event you have made costly plans and do not meet the degree requirements as outlined in the online version of the Graduate School Faculty and Student handbook, all the Graduate School assumes no liability.**

**Once your Project/Paper document has been approved by the Program Director, complete the following:**

\_\_\_\_ Confidential Report of the Project/Paper

\_\_\_\_ Final Project/Paper-one copy to the Dean

\_\_\_\_ Application for the Master's Degree

\_\_\_\_ Provide a forwarding address, telephone number, email address, and future job details

\_\_\_\_ Turn in your MCW ID card to the Graduate School (if applicable)