

Bemidji State University

School of Graduate Studies
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DEPARTMENTAL CONFIRMATION OF DEGREE REQUIREMENTS

Student Name: _____ StarID/Student ID#: _____

Degree Program: _____

This student has met the following requirements for degree completion.

I. Completion of all graduate coursework, including:

- MinnState 50% Requirement (6000-level credits, less the final project/paper course)
- Residency Requirement/Transfer Credits
- 3.00 Cumulative GPA

II. Completion of Competency Requirement Course: _____

III. Completion of Written Examination Yr/Term: _____

IV. Completion of Oral Defense/Presentation Date: _____ Time: _____ Room: _____

V. Completion of Final Project:

Title of Project/Paper: _____

Advisor/Committee Chair (from department): _____

Committee Member 1 (from department): _____

Committee Member 2: _____

My signature below confirms that this student has met all requirements necessary for degree completion.

Advisor Signature Date

Program Coordinator/Chair Signature Date

College Dean Signature Date

Director, Graduate Studies Signature Date