

Notification of Completion for Post-Master's (non-degree/certificate) option

This form must be submitted to **College of Nursing Graduate Records*** no later than the second Friday of the semester in which completion is expected. **Students submitting forms after that date may not be included in the College of Nursing's Convocation ceremony (applies to spring semester only).**

INSTRUCTIONS

Please submit electronically as a single scanned pdf or MS Word document to CON-gradrecords@osu.edu

Last name

First name

Middle name

Ohio State name.# (e-mail)

Adviser Name

Specialty Area

Completion expected (Semester/Year) _____

This application is valid for this semester only.

Your adviser must review your curriculum plan and approve your completion.

The student identified above will complete the Post-Master's option for the semester indicated:

Advisor Signature: _____

Electronic signatures are acceptable. *An email may be submitted in place of this signature.*

Date

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- Because the College of Nursing Post Masters option is non-degree seeking, these students are not included in the university's Commencement exercises and we are unable to include the specialty on the transcript.
 - **Post Masters (non-degree) students are invited to the College of Nursing's Convocation ceremony**