



MISSISSIPPI VALLEY STATE UNIVERSITY

Master's Candidate for Graduation Clearance Form

To facilitate the process to graduate, the Master's candidate must clear at the departments/centers listed below. The director or authorized personnel must sign and affix the department/ center stamp to verify that the clearance process has been completed.

Student Name _____ Student ID Number _____

Program of Study _____ Commencement Date _____

The prospective graduating Master's student whose name is listed above has:

Office of Financial Aid

____ Provided the confirmation code that the online exit counseling has been completed.

____ / ____
Verified by Date

Stamp of Approval

Office of Fiscal Affairs

____ Cleared outstanding account balances, including loans that have been reported as of date verified. The student is responsible for any changes occurring after this date

____ / ____
Verified by Date

Stamp of Approval

Please retain a copy of this form for your records.