

Graduate Continuation Form

For use only by graduating undergraduate students with a 3.0 or higher UG GPA who are continuing to the master's level. Please complete and return to the Office of Graduate Admissions.

Barry ID _____

Name _____
First Middle Initial Last

Address _____
Street Number/P.O. Box Apt. #

_____ City State ZIP

Primary Phone (_____) _____ Email _____

Current Undergraduate: Program _____ Location _____ Barry GPA (3.0 or higher) _____ Barry University undergraduate degree Conferral date: _____	Intended Graduate: Program _____ Location _____ Start Term <input type="checkbox"/> Fall 20____ <input type="checkbox"/> Spring 20____ <input type="checkbox"/> Summer 20____
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I request admission to the program indicated above. As a condition of being admitted to this program at Barry University, I agree to abide by all rules (appropriate to the university and the program) in place at the time of my admission.

Student's Signature _____ Date _____

FOR OFFICE USE ONLY Dean or Designee _____ Date _____ Approvals: <input type="checkbox"/> Admitted Provisionally <input type="checkbox"/> Admitted Fully <input type="checkbox"/> Decision Deferred Credit Limit _____ Additional Comments _____ _____ _____
