

**Westfield State University
College of Graduate and Continuing Education**

CAPSTONE APPLICATION

Student Name: (print) _____ **Student ID:** A _____

Phone: _____ **Personal Email:** _____

Street: _____ **City/State/Zip:** _____

Expected Date of Program Completion: _____ Note: Participation in commencement exercises when the Capstone remains incomplete is subject to the approval of the Program Director and CGCE Dean.

To Be Completed By Capstone Supervisor

Supervisor Name: _____ **Supervisor Rank:** _____
(print)

Preferred Phone: _____

Capstone Semester: _____ **Capstone Number/Title:** _____
Number Title

Public Presentation: _____
(Please give estimated time and place for public presentation of final project.)

Required Signatures

Student: _____ **Date:** _____

- I understand that:
1. If I do not register/submit payment within 5 days of notification, the \$100 delayed payment fee will be added to the total.
 2. It is my responsibility to attach to this form, departmental capstone approval requirements such as the scholarly essay, 150 word abstract, explanation of critical approach, annotated bibliography, or other required documentation for approval.
 3. Completion of the Capstone experience must meet all current departmental requirements which may include, but are not limited to: a) public presentation of the paper, b) specified minimum length of paper, c) inclusion of both experiential and research/writing components.)

***Capstone Supervisor:** _____ **Date:** _____

***Graduate Program Chair:** _____ **Date:** _____

Dean, CGCE: _____ **Date:** _____

*Signature indicates: 1) prior approval of department graduate committee if required, 2) approval of **attached** precapstone requirements such as: scholarly essay, 150 word abstract, explanation of critical approach applied to text, annotated bibliography, and/or any other documentation currently required by the department.

Office Use Only

Date Student Contacted by email and phone for registration and payment: 1) _____ 2) _____

Date Faculty Contacted by email and phone, (when 5 days have passed since student contact w/o registration): 1) _____
2) _____