

Complete and return this form to:

University of Rochester - Simon Business School
Office of the Registrar
2341 Carol Simon Hall
Box 270100
registrar@simon.rochester.edu
Phone: (585) 275-8071 / Fax: (585) 276-0244



DEGREE AUDIT REQUEST FORM FOR
MASTER OF BUSINESS ADMINISTRATION (MBA) GRADUATES

Directions

- Use this form if you graduated from the Simon School and are requesting an audit of your academic record to determine if you are eligible for minors or specializations which you did not apply for at the time of graduation.
- The Registrar's Office will determine if you meet the requirements based on the catalog requirements at the time of graduation.
- Please allow 5 business days for your request to be processed. The Registrar's Office will notify you if you have met or not met the requirements.

Student Name: _____
Last First MI

UID#: _____ **E-mail:** _____

Program: _____ **Graduation year:** _____

I would like to apply for the following:

Minor

1. _____
2. _____

Specialization

1. _____
2. _____

Student Signature: _____ **Date:** _____
month/day/year

Registrar's Office Use Only

Revision: 8/2022

Date Received: _____ Date Processed: _____ Approved _____ By: _____