

**Complete and return this form to:**  
University of Rochester - Simon Business School  
Office of the Registrar  
245R Gleason Hall  
[registrar@simon.rochester.edu](mailto:registrar@simon.rochester.edu)  
Phone: (585) 275-3533 / Fax: (585) 271-3907



**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, specializations or concentrations which you did not apply for on the Application for Graduation form 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. \_\_\_\_\_

Concentration

1. \_\_\_\_\_
2. \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
month/day/year

*\*Registrar's Office Use Only\**

Revision: 3/2020

Date Received: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Approved? \_\_\_\_\_ Darden Updated: \_\_\_\_\_ ISIS Updated: \_\_\_\_\_ By: \_\_\_\_\_