

GRADUATE COMMENCEMENT SPEAKER APPLICATION INSTRUCTIONS

ELIGIBILITY CRITERIA

To be considered for this distinction, you must:

- be cleared to participate in the December 2026 commencement ceremony
- have a grade point average at or above 3.0
- demonstrated service to the university community and a record of good university citizenship and cooperation
- demonstrated evidence of meaningful co-curricular experiences, entrepreneurial or innovative projects, and/or professional growth activities
- be in good disciplinary standing
- be available to interview and present your speech (speech need not be memorized)

FILING INSTRUCTIONS

To be considered for this honor, the applicant must complete and submit this application and all supporting materials by the deadline listed below. Additional materials may not be added to this application. Failure to follow these instructions may result in the rejection of the application. It is the applicant's responsibility to ensure that all materials are submitted by the stated deadline.

BIOGRAPHICAL DATA

Please complete this section in its entirety so that we have biographical information for publicity purposes.

Full Name: _____ **Student ID Number:** _____

KU Email Address: _____ **@kutztown.edu** **Phone Number:** _____

Major(s): _____ **GPA:** _____

Permanent Address: _____

APPLICATION MATERIALS AND DEADLINE (due Tuesday, October 13, 2026)

- this completed form
- 150-word statement sharing why you are interested in this opportunity
- resume which includes active involvement in co-curricular experiences, entrepreneurial or innovative projects and/or professional growth activities
- contact information for two faculty or staff reference letters

RESUME

Please review the Career Development Center's [Resume Writing Guidebook](#) or pick up a hard copy at 113 Stratton Administration Center for assistance with drafting a quality resume. You are strongly encouraged to submit your resume draft to the CDC staff for feedback before submitting it with your application.

REFERENCES

Please include reference letters from two faculty or staff to support your application and are familiar with your contributions to Kutztown University and/or the community. It is in your best interest to choose staff or faculty who can attest to your contributions outside the classroom and not solely your academic performance which, to some degree, is measurable by your grade point average. The Graduate Speaker Selection Committee will reach out to your references.

AUTHORIZATION

You must choose responses to each of the statements listed below. The information collected is vital to promoting recipients, but it is your choice whether or not you grant us permission to use the information for the reasons indicated. You must sign this document.

By signing below, I hereby release my academic and judicial records to the division of Academic Affairs as they pertain to this application. I further understand that the information I have provided in this document is subject to verification. Kutztown University may publish the following information in the Commencement Ceremony program, should I be selected to receive this honor. I grant permission to publicly release my (circle all that apply):

grade point average

academic honors and awards

co-curricular involvement, entrepreneurial or innovative projects, professional growth activities, and awards

Applicant's Signature: _____

Date: _____

REFERENCES

Please provide contact information for two faculty and/or staff whom you have chosen as a reference for you who are familiar with your contributions to Kutztown University and your qualifications to offer the commencement address:

Reference One:

Name: _____ Email Address: _____ Phone Number: _____

Reference Two:

Name: _____ Email Address: _____ Phone Number: _____

APPLICANT'S WAIVER OF RIGHT TO ACCESS

The Family Educational Rights and Privacy Act of 1974 (FERPA) allows you to waive your right of access to confidential letters or statements written on your behalf if the recommendation is used solely for the purpose of receipt of this honor. The university does not require that you make such a waiver as a condition for application.

Please circle one option below.

I hereby:

voluntarily waive

OR

do not waive

my right to examine this confidential evaluation.

Applicant's Signature: _____

Date: _____

UPON COMPLETION, PLEASE RETURN THIS FORM BY **TUESDAY, OCTOBER 13, 2026**, TO:

Dr. Carl J. Sheperis, Vice Provost & Dean of Graduate Studies

484-646-5837 sheperis@kutztown.edu