

|--|

Please complete this Form and return it to the Registrar's Office by the specified date in the academic calendar. The information which you provide will be used when ordering your diploma and in printing the Commencement Program. Therefore, be certain that all requested information is completed accurately and fully. In order to receive your diploma, all financial obligations owed the College must be satisfied and financial clearance issued by the Business Office. And, the Exit Counseling must be completed with Financial Aid.

<mark>2.</mark>	PRINT YOUR MAILING ADDRESS:		
3.	CHECK THE MONTH YOU ANTICIPATE TO GRADUATE:		
	() MAY () AUGUST () I	DECEMBER YEAR	
<mark>4.</mark>	DEGREE YOU ARE APPLYING FOR: () A.A	() B.A. () B.S. () BSW	
	() M. S	S. () D.P.T. () Ed.D. () PHD.PC	
<mark>5.</mark>	MAJOR/PROGRAM (if applicable):		
	MINOR (if applicable):		
5 <mark>.</mark>	STUDENT SIGNATURE:		
ΓO 1	BE COMPLETED BY REGISTRAR'S OFFICE: AC	ADEMIC CREDIT INFORMATION	
	CREDIT TYPE:	# CREDITS:	
	TRANSFER CREDIT:		
	INSTITUTIONAL CREDIT TO DATE: (Excluding Developmental Credits)		
	TOTAL CREDITS TO DATE:	(CUM. GPA) DATE	
	CURRENT SEMESTER:		
	BE COMPLETED BY THE ACADEMIC DEAN:		
COU	URSES/CREDITS NEEDED TO GRADUATE:		
		TOTAL OPENIES VEDDED	
	GIBLE TO GRADUATE: []Yes []No		
DIV	ISION DEAN'S SIGNATURE:	DATE:	
FIN	AL GRADUATION VERIFICATION:		
Tota	al Credits Earned: Cumulative GPA: _	Honors:	
	ADUATION STATUS: () Confirmed () I		