



Records Office

Graduation Application

Please print name clearly — as it will appear on your diploma

First Name: _____ MI: _____ Last Name: _____

Student ID No: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

Graduation Fee Paid (To be signed by Financial Aid) _____ Date: _____

DEGREE INFORMATION

Please Select your degree program

_____ **Bachelor of Arts**

_____ Behavioral Sciences

_____ English and Communications

_____ Mathematics

_____ **Bachelor of Science**

_____ Computer & Information Science

_____ Electronics Engineering Technology

_____ Biology

_____ Business Administration

_____ **Associate of Arts**

_____ Liberal Arts

_____ **Associate of Applied Science**

_____ Computer & Information Science

_____ Electronics Engineering Technology

_____ Office Administration

GENERAL EDUCATION CHECK (Does not apply to Certificate)

To be filled out by Records Office

ERN Hours: _____ HM279: _____

Cum GPA: _____ HM491: _____ MFAT: _____

Comments: _____

Final Term Advising (To be filled out by Academic Advisor)

Upon successful completion of the following requirements, I certify that this applicant will be eligible for the above named degree.

Courses Remaining: _____

Program GPA: _____ Final Term Should Be: _____

Comments: _____

Advisor Signature: _____ Date: _____

CONDITIONS TO BE FULFILLED BY THE CANDIDATE FOR GRADUATION

1. The applicant must have attained a minimum of 2.0 cumulative grade point average in all academic work completed at this University prior to filling out this application.
2. The applicant must complete a minimum of 24 or 48 quarter hours of work in residence required for an Associate or Bachelor degree respectively.
3. The applicant must meet all requirements of the General Education Core, Major Field of Study, and Minors or Free Electives specified in the catalog for his/her degree programs.
4. The applicant must attain a balance between lower division and upper division level courses as specified in the catalog and complete all requirements in the major.
5. The applicant must successfully complete GenED and MFAT exams.
6. Official copies of their transcripts from each institution you have attended must be on file with the Records office.
7. The applicant is responsible for settling financial accounts and other charges with the university before he/she is admitted to the convocation ceremony.
8. The graduation fee of \$200.00 must be paid in full two weeks before the Convocation Ceremony. **(This fee is nonrefundable).**

It is my understanding that all the above conditions must be met, or I am subject to be excluded from the convocation ceremony and must re-file for the next one.

I take full responsibility for the accuracy and legibility of the information on this form. Should a diploma be ordered incorrectly due to the information provided by me, I agree to the cost of \$30.00 for reordering my diploma.

Receipt of the diploma may take nine to ten weeks after the end of the term. If you wish to have your diploma mailed, you must fill out the appropriate request form obtained from the Records Office.

Do you intent to participate in the graduation Ceremony? *(Check One)*

Yes! I can't wait! Regretfully, I am unable to attend.

Please provide your height and weight measurements for your cap and gown.

Height: _____ Weight: _____

Student Signature: _____ Date: _____

Please return this application to the Records Office when completed.