



Submit to the Registrar's Office at least 60 days prior to the expected date of graduation.

Student Information

Please print your name exactly as it will appear on the diploma

Name: _____

Student ID #: _____ **Phone #:** _____

Email: _____

Please use the address to which the diploma will be sent

Address: _____

Street

City

State

Zip

Degree Information

Note: A Separate Intent to Graduate Form must be submitted for a second degree.

Expected Date of Completion:

March May July/August October December **Year:** _____

Degree: _____

Major(s) _____

Concentration: _____

Minor

(if Applicable): _____

Attending May Commencement? Yes No

Please list any courses you are currently taking at another institution or plan to take over the summer:

Agreement/Approval

I understand that:

- My degree will not be posted to my academic record until all coursework has been reviewed and validated by the Registrar's Office
- I must submit a new Intent to Graduate Form if all degree requirements are not met by the indicated expected date of completion

I have attached a copy of my FalconMap Audit

Student Signature _____

Date _____

Advisor Signature (CBASE) _____

CH. Teacher Education Signature (if Applicable) _____

Office Use Only

Requirements Met _____ **Conferral Date** _____ **Freeze Audit** _____

Award Letter Sent _____ **Degree Posted** _____ **IG** _____

Prob Letter Sent _____ **Honors (if app)** _____ **Final Approval** _____