



# GRADUATION UPDATE FORM

*Only fully completed forms will be processed*

I wish to update my graduation date to the below stated term and understand that I must be enrolled during the term for which I anticipate graduating. This update form does not guarantee that I will complete degree requirements during the specified term. All coursework must be in compliance with university departmental regulations and my cumulative grade point average must be a 3.0 or better in order to complete degree requirements.

Print your full name as it should appear on the degree (limit to 3 names & do not use initials)

Student ID

E-mail address

Current address (street, city, state, and zip code)

( )

Telephone number

Major field (and concentration, if any)

Hometown (city, state, country)

M.B.A.  M.A.  M.S.  M.T.  Ed.S.  D.P.T.  Ph.D.

Degree

Please update my graduation date from Aug  Dec  May  \_\_\_\_\_ TO Aug  Dec  May  \_\_\_\_\_

Previous anticipated graduation month and year

Expected graduation month and year of graduation

DEGREE PLAN: Plan A (Thesis) \_\_\_\_\_ Plan B (Comprehensive Examination) \_\_\_\_\_ Not Applicable \_\_\_\_\_

Previous degrees (complete name of institution, degree received, year received)

Student Signature

Date

Program Coordinator's or Dept. Chair's Signature

Date

Comments: \_\_\_\_\_

Office Use Only

Approved [ ] Denied [ ]

Graduate College Counselor

Date