CANDIDATE INFORMATION

Student Name:* ___________________________________________ Student ID #: ___________________________
*The name on your diploma will match your name on university records. Changes may be made through the Registrar’s Office, Registration Division.

Expected Graduation Date:   Spring (May) 20 _____ Summer (August) 20 _____ Fall (December) 20 _____

Degree Type: ☐ BA  ☑ BS  ☐ BUS  ☐ BSW  ☐ BFA  ☐ BMUS  ☐ HBA** ☐ HBS** ☐ Other ______

Combined BS/MS program ☐ (Submit with Application for Graduate Degree by due date for graduating semester.)

MAJOR INFORMATION (required)  REQUIRED INFORMATION IF COMPLETING MINOR(S)

Major: ___________________________________________ Minor: ____________________________

Major Catalog Year: (required) ________ — 2nd Minor: ____________________________

Emphasis for Major: ________ None ____________________________ Catalog Year

I understand that it is my responsibility to be familiar with and meet the departmental, Bachelor’s degree, and General Education requirements for graduation; the Advisor’s review is preliminary; and final certification requires an audit by the Graduation Division of the Registrar’s Office after grades are posted in my final semester.

Student Signature: ___________________________________________ Date: _____________

**Honors degree candidates:** If you plan to complete the honors program with a thesis, you must have this application signed by your major advisor, Departmental Honors Advisor, and the Honors College Advisor. Specific courses are required for an honors degree and should not be confused with graduating with honors.

ADVISOR ENDORSEMENT(S)

This student and I have reviewed the corresponding degree audit for the student’s declared plan(s) and catalog year. We have discussed plans to fulfill any outstanding requirements. I have entered all approved exceptions to requirements into DARS. If questions remain regarding General Education and Bachelor’s degree requirements I have referred the student to University College for further advising. If questions remain regarding total or upper division hours, I have referred the student to the Registrar’s Office.

Major Advisor Signature: ___________________________ Phone #: 5-7596 Date: _____________

Minor Advisor Signature: ___________________________ Phone #: ___________ Date: ____________

2nd Minor Advisor Signature: _________________________ Phone #: ___________ Date: ____________

Dept. Honors Advisor Signature: ______________________ Phone #: ___________ Date: ____________

Honors College Advisor Signature: _____________________ Phone #: ___________ Date: ____________

FOR REGISTRAR’S OFFICE USE ONLY

Entered: ___________ Evaluated: ___________ Audited: ___________ Posted: ___________