Andrews University

Office of Academic Records

GRADUATE APPLICATION FOR GRADUATION

This form also designates whether you will be marching in commencement ceremonies.

IT IS THE RESPONSIBILITY OF THE STUDENT TO FULFILL ALL GRADUATION REQUIREMENTS AND DEADLINES.

Name: _____ ID # _____
Last First

Email: _____ Phone# (____) _____

Anticipated Date of Graduation: _____/_____
Month Year

CHECKLIST: PLEASE CHECK ONE BOX:

Did you fill out the Advancement to Candidacy and Check Sheet Form? ☐YES ☐ NO

Seminary Professional Program students: please consult your department for the appropriate form.

May and August Graduates

Are you planning to march in the graduation ceremony? ☐YES ☐ NO

December Graduates Only

Are you planning to march in the graduation ceremony in May? ☐ YES ☐ NO

Graduate Degree/Major: _____

Concentration: _____

PRINT YOUR NAME BELOW EXACTLY AS YOU WANT IT TO APPEAR ON YOUR DIPLOMA.

_____
First Middle Last/Surname

TO RECEIVE YOUR DIPLOMA:

The Office of Academic Records uses the exact address supplied by the student within Vault. It is the responsibility of the student to ensure that this address is accurate and deliverable.

If for any reason you do not graduate at the time you have indicated above, please remember to file a new graduation application when you decide to graduate. Your name will **NOT** be automatically included for the next graduation.

Diplomas and official transcripts with the degree posted will be available two weeks after Commencement/Conferral of Degree. Clearance must be obtained from the Student Financial Services Office in order to receive your diploma.

_____ _____
Signature Date