

Application for Graduation for an Associate's Degree

Carson-Newman University

Last Name _____ First Name _____ Student Number _____

Name to be printed on diploma _____

Applying for Graduation for which term: May May Term* July* Dec YEAR: _____
Summer graduates may participate in the December Commencement following the term of completion

Are you planning to participate in commencement for this degree? _____ Yes _____ N

Please check one: AA in Liberal Arts AA in Christian Ministries AS in General Studies

Catalog Year graduating under: _____

Local Phone #: (_____) _____ Cell Phone #: (_____) _____

If you wish to pursue a Bachelor's degree after completion of your Associates Degree, please list all Major(s) and Minor(s) below:

Major _____ Second Major _____ Degree: _____

Minor(s) _____

Local Mailing Address: *(if different than home/permanent address)*

Street _____ City _____ State _____ Zip _____

C-N Box # _____ C-N Email _____ @ _____ . _____

Student Signature: _____	Date: _____
Advisor Signature: _____	Date: _____
Registrar Signature: _____	Date: _____

INSTRUCTIONS:

Submit Application for Graduation and Copy of Evaluation to Registrar before the end of the semester in which 45 hours is completed, prior to the term of graduation.

- Any changes in course listings on degree plan must receive appropriate approval.
- Satisfactory completion of common degree requirements, Liberal Arts Core and electives fulfill graduation requirements and ultimately rests with the student.

Graduation Check: C-N Hours _____ C-N GPA _____ Cum Hours _____ Cum GPA _____

Date Graduation Verified and Approved _____ by _____