

Please TYPE
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ALABAMA AGRICULTURAL AND MECHANICAL UNIVERSITY
APPLICATION for UNDERGRADUATE GRADUATION

Type your name as it should appear on your diploma EXPECTED GRADUATION (Sem/Yr): _____ 1st SEM \ YR ENROLLED: _____ BULLETIN USING: _____

FIRST MIDDLE LAST STUDENT ID NUMBER: _____ DEGREE: _____

MAJOR: _____ CONCENTRATION: _____ MINOR: _____

MAILING ADDRESS: _____

CONTACT INFORMATION: _____ BULLDOG EMAIL _____

PHONE (primary) PHONE (alternate)

COMMENTS:

Has the student, for the degree . . .	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	COMMENTS:
• ACHIEVED REQUIRED GPAs	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
• REMOVED INCOMPLETE GRADES	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
• REMOVED INSUFFICIENT GRADES	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
• SUBMITTED COURSE SUBSTITUTIONS	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Was the student a . . .	Enter the institution below and sem/yrs attended.				
• TRANSFER	<input type="checkbox"/>				
• VISITING	<input type="checkbox"/>				
• TRANSIENT	<input type="checkbox"/>				

COURSES NEEDED TO COMPLETE REQUIREMENTS FOR THE DESIRED DEGREE:

Sem/Yr		Sem/Yr		Sem/Yr		Sem/Yr	
Subj/No	Title	Subj/No	Title	Subj/No	Title	Subj/No	Title

With the exception of the courses currently enrolled, and/or future courses to be taken, the above-named student has completed all academic requirements as prescribed in the bulletin, as well as changes that have been made to the program.

Student's Signature	Advisor's Signature	Chairperson's Signature	Dean's Signature
Date of Signature	Print or Type Name	Print or Type Name	Print or Type Name
	Office Extension	Office Extension	Office Extension
	Date of Signature	Date of Signature	Date of Signature

PLEASE NOTE: If you do not graduate in the semester you have applied, a **NEW** Senior Record Check Packet must be submitted.