

Application for Degree 2016-2017

Nan	Name															Student ID #:																							
Plea	Please print the name (First Middle Last) you wish to appear on the diploma:																																						
Par Hor Do	Name spelled as it sounds																																						
Major 1:														_	Major 2:																								
Min	Minor 1: I														Minor 2:																								
	Term of Completion																																						
(req	Summer term (degree conferred on August 30, 2017) (requirements must be completed by 8/13/17 & application for degree received by Registrar by 7/1/2017) Summer applicants wanting name in Commencement Program must submit application by 4/1/2017.																																						
Rec	eiı	ot o	f di	iplo	oma	a: D	olgi	ma	s ar	e is	sue	d w	/ithir	ו 3-	4 w	veek	s f	ollo	owi	ina	gra	adu	ati	on	, pi	rov	ide	ed t	he	stu	ıde	nťs	ac	cou	int	is p	aid	in	

ceipt of diploma: Diplomas are issued within 3-4 weeks following graduation, provided the student's account is paid in full. Diplomas can be picked up in the Registrar's Office or will otherwise be mailed to the student's permanent home address on file with the college.

Certification by applicant:

- I have reviewed my academic progress with my advisor and will fulfill all course, GPA, and hour requirements for the above degree and major(s) as outlined in the college catalog.
- I agree to complete and receive my diploma under the term I have selected. If circumstances arise that prevent me from fulfilling my degree by the term listed, I understand it is my obligation to file a new application.

Signature:_

Date:_____

Email, Mail or Fax signed and completed form to: <u>registrar@sckans.edu;</u> Office of the Registrar, 100 College St., Winfield, KS 67156; F: 620.229.6245