Application for Degree 2017-2018

Rec'd by Reg. Office: _____ Processed by & Date: _____



Name	Student ID #:	
Email Address	Phone Number	
Degree: □ Bachelor of □ M	Master of Doctorate of Education	
Major 1:	Major 2:	
Minor 1:	Minor 2:	
Please print the name (First/Middle/Last) you wish to appear on the diploma and commencement program. Use upper and lower case.		
Hometown City, State/Country:		
□ Spring term (degree conferred on May 13, 2018) - check only if classes officially end by 5/4//2018 (requirements must be completed by 5/10/2018 & application for degree received by Registrar by 4/1/2018)		
□ Late Spring term (degree conferred on May 30, 2018) (requirements must be completed by 5/13/2018 & application for degree received by Registrar by 4/1/2018)		
☐ Summer term (degree conferred on August 30, 2018) (requirements must be completed by 8/12/18 & application for degree received by Registrar by 7/1/2018) Summer applicants wanting name in Commencement Program must submit application by 4/1/2018.		
 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 acknowledge that participation in the commencement ceremony does not guarantee that I have met all degree requirements. 		
Signature:	Date:	
Email, Mail or Fax signed and completed form to: registrar@sckans.edu ; Office of the Registrar, 100 College St., Winfield, KS 67156; F: 620.229.6245		