SOUTHWESTERN COLLEGE 1885

Application for Degree 2015-2016

Name _____ **Student ID #**: _____

Please print the name (First Middle Last) you wish to appear on the diploma:

Participation in Commencement: Students may participate in the May 8, 2016 graduation ceremonies regardless of term of completion for the 2015-16 academic year; degrees will be conferred in accordance with the date designated by the student on the Application for Degree provided all graduation requirements have been met satisfactorily.

Hometown City, State/Country:_____

Do you plan to attend commencement? Yes ☐ No ☐ Uncertain ☐ (For planning purposes only)

Undergraduate ☐ **Graduate** ☐ **Degree:** _____

Major 1: _____ **Major 2:**_____

Minor 1: _____ **Minor 2:**_____

Term of Completion

☐ **Fall term** *(degree conferred on December 30, 2015)* (requirements must be completed by 12/20/2015 and **app for degree received by Registrar by 11/1/2015**)
☐ **Spring term** *(degree conferred on May 8, 2016)-check only if classes officially end by 4/29/2016* (requirements must be completed by 5/5/2016 and **app for degree received by Registrar by 4/1/2016**)
☐ Late **Spring term** *(degree conferred on May 30, 2016)* (requirements must be completed by 5/15/2016 and **app for degree filed with Registrar by 4/1/2016**)
☐ **Summer term** *(degree conferred on August 30, 2016)* (requirements must be completed by 8/14/16 and **app for degree filed with Registrar by 7/1/2016**) Summer applicants wanting name in Commencement Program must submit application by 4/1/2016.

Receipt 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:**9/1/15

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