



Will you receive Honors College recognition? \_\_\_\_\_

List the courses you will complete during your last semester. If these change, please contact the Registrar's Office with the changes.

Course Number      Course Title      Credits

Office Use Only

Date Received Form

Honors

Date Degree Posted

Date Diploma Mailed

Please process a degree audit with your assigned advisor and attach a copy to this request. Any changes made in registration after submission of this form should be approved prior to making the change in order to complete the requirements by the graduation date above.

I understand that it is my responsibility to make certain all degree requirements for graduation have been met and that the degree will not be awarded until all requirements are complete and grades received even if I walk and am listed in the program.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed the final degree plan and evaluation with this student and I believe this student will complete the requirements if he/she follows the degree plan discussed.

Required:

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: All degree requirements must be completed and transcripts submitted to the Registrar by the date of graduation or the student will be removed from the graduation list.