SONOMA STATE UNIVERSITY
Office of Admissions and Records

GRADUATION APPLICATION

Print your name as you wish it to appear on your Diploma

Student ID Number

Current Address & Telephone
Local Address
City/State/ZIP
Telephone ( )

Diploma Contact Information
Diploma Address
City/State/ZIP
Diploma Phone

I plan on graduating at the end of:

Fall ❑ Spring ❑ Summer ❑ Year _____

My degree will be a: (circle one)

BA BFA BS

Campus Degree ❑ External Degree ❑

	Yes	No
Include my name on lists released to the media	❑	❑
Include my name in the Commencement Program	❑	❑

Major(s)
Concentration(s)
Minor
Signature Date

Print below any course you will be using to complete degree requirements. Include courses in-progress, course in which you are finishing but are currently Incomplete, and courses you will take in the future to meet degree requirements.
Do not list any courses already completed.

Department	Number	Course Title	Units	School	Sem/Yr	A&R Use Only

Bachelor Degree Candidates Only: List any course work you wish considered as *Provisional Graduate Credit.* Courses must be upper division classes taken in your final semester and not be used for your Bachelor's Degree. See the Catalog for details.

Department	Number	Course Title	Units	Semester/Year	A&R Use Only

Posted to Eden-OA: _____