

APPLICATION FOR GRADUATION

For more information visit: www.abac.edu/academics/registrar
Communication about graduation will be sent to your **Stallion Email Account**

INSTRUCTIONS FOR STUDENTS:

- Apply for graduation during your final semester at ABAC. Your completed application should be received by Academic Support by the following deadlines:
 - Fall Semester - 5th Friday after classes begin
 - Spring Semester - 5th Friday after classes begin
 - Summer Semester - 3rd Friday after classes begin
- Meet with your advisor to complete your application and degree evaluation. If pursuing multiple degrees, complete a separate application for each one.
- Ensure your mailing address is up-to-date in Banner Web. This is the address where your diploma will be mailed.
- Bring your completed graduation application and DegreeWorks printout to Academic Support. An Academic Counselor will review your application to ensure the application is complete and all required documents are included.

STUDENT INFORMATION: Term/Year: _____ Participate in Graduation Ceremony? Yes No
Do you have a mobility impairment? Yes No

Name _____ ID# _____
LEGAL NAME ONLY - NO NICKNAMES - Print name EXACTLY as it should appear on the diploma.

Signature _____ **Official Communication about your graduation application and graduation will be sent to your Stallion Email**

Degree Type: BA/BS AA/AS AAS AFA Program _____ Cell Phone _____
(Choose One)

Are you applying for a Minor? Yes (please complete and attach Minor Application) No

Are you a veteran? Yes No

If not completing final courses/graduation requirements at ABAC, provide school name: _____

1 ADVISOR & SCHOOL APPROVAL:

Advisor's Name Printed

Signature of Academic Advisor Date _____

Signature of Department Head or Dean Date _____

2 Have you ever received a student loan at ABAC?

Yes: Office of Financial Aid **must sign off** on your application

No: Student initials: _____ and take to Academic Support

Office of Financial Aid Signature Date _____

3 Received by Academic Support:

Date: _____ By: _____ Signatures: _____ Degree Evaluation: _____

TO BE COMPLETED BY ACADEMIC SUPPORT :

Items noted below indicate graduation requirement(s) which are not met. See your Academic Advisor if you have questions:

1st Review _____ Date _____ Final Review _____ Date _____

Posted in SHADEGR _____ Date Degree Recorded _____

Email sent: _____ Advisor _____ Student _____