

### CLEARANCE FOR GRADUATION

To: Department Chairperson

Please complete sections I & II below, attach Program of Study and forward to "The Graduate School".

Section I (To be completed by Department)

Student Name \_\_\_\_\_ Banner # \_\_\_\_\_  
(Last) (First) (Middle)

\_\_\_\_\_  
(Address) (City) (State) (Zip)

Student has applied for Graduation for the \_\_\_\_\_ Semester, 20\_\_\_\_.

Section II (To be completed by Department)

1. Admitted to candidacy YES___ NO___	6. Passed the Comprehensive Examination. YES__ No__
2. Graduate hours completed _____.	7. Graduate hours substituted/waived _____.
3. Graduate hours currently enrolled in _____.	8. Program of Study attached YES___.
4. Graduate hours successfully transferred _____.	Comments:
5. Needs to transfer _____ graduate hours from (name of college(s) university(ies) from which course(s) is/are being transferred)	

REQUIREMENTS NEEDED TO GRADUATE

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Department Chairperson \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)

Section III (To be completed by The Graduate School)

DATE RECEIVED FROM CHAIRPERSON \_\_\_\_\_

- |   |                                   |
|---|-----------------------------------|
| 1. Overall GPA _____                    | 4. Thesis Required? YES___ NO___  |
| 2. Admissions to Candidacy YES___ NO___ | 5. Thesis Completed? YES___ NO___ |
| 3. Passed Comprehensive? YES___ NO___   |                                   |

REQUIREMENTS NEEDED FOR GRADUATION

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

\_\_\_ APPROVED \_\_\_ NOT APPROVED \_\_\_\_\_  
DEAN OF THE GRADUATE SCHOOL (Signature) DATE

CC: Department Chairperson  
Registrar