

Student's Signature

## GRADUATION APPLICATION FORM

Name		SSN/SID_		
Major	Concentratio	n/Track		
Local Address				
City	State		Zip	
Telephone				
Local Day Preferred Email Address	Cell			
I wish to graduate following the				
Anticipated Graduation:	_MayAugust _	December	Year:	
<ol> <li>I have been granted full admission</li> <li>I have taken the Rising Junior Exam</li> <li>I have completed the Senior Exit Exam (ETS-SF)</li> <li>I have filed my Graduation Application with Records</li> <li>My upper division business core GPA is 2.000 or higher</li> <li>My major area GPA is 2.000 or higher</li> <li>My overall cumulative TSU GPA is 2.000 or higher</li> </ol>			YesYesYesYesYesYesYesYesYesYesYesYesYes	No _No _No _No _No _No
List all courses in which you a enroll in the following semeste Fall		led in and all o	courses in wl Summer	
Course Name and Number	Course Name and N	umber	Course Nan	ne and Number
List any questions that you wo	ould like answered durin	ng your senior	clearance a	ppointment.
I understand that I must have				
incompletes must be removed to below indicates that I have rev best of my ability.	-			

Date