



Application for Graduation

Personal Information

Name (Please print your name as you wish for it to appear on your diploma and in the graduation program):

Address: _____

Phone: _____ Email: _____

Semester you entered the Program (for example, Spring 2013): _____

Expected Date of Graduation: _____

Degree Information:

Associate's (Nursing) Associate's (Health Sciences) Associate's (Radiography) Bachelor's (Nursing)

Graduation Ceremony:

Aultman College graduation ceremonies take place after the spring and fall semesters. If you complete your degree requirements in spring you can participate in the May graduation ceremony. If you complete your degree requirements in summer or fall you can participate in the December ceremony.

Do you wish to participate in the graduation ceremony? Yes No

If you plan to participate in the graduation ceremony, please indicate the following information for the ordering of your cap and gown (this information will be kept private and viewed only by the Campus Coordinator who orders the gowns):

Height (in feet and inches): _____ Weight: _____

ASN Students:

As a graduating student in the Associate of Science in Nursing Program, I understand that I must take a live review course at the end of the semester in which I intend to graduate. Failure to do so will result in the Division of Nursing not sending my letter to the Board of Nursing and the Registrar not sending out my diploma and official transcript.

All Students:

I have reviewed my degree audit and the program requirements for my degree program. I verify that I will meet all degree requirements during the semester of this application.

I understand that all transcripts for transient work, CBE and CLEP/DSST/UExcel results are due to the Office of the Registrar **three weeks before the end of the semester**. Failure to turn in this information before the deadline will result in a graduation delay (will be moved to the following semester's graduation list).

Student Signature: _____ Date: _____