Please save this form to a file first before filling it in.



Request to Participate in Commencement

(For candidates with grade point averages of 2.000 or higher in the major & overall, who are lacking no more than 6 semester hours)

Student Name ((Please Print)	CU Student ID No.	CU Student ID No.	
lease provide an addre	ess to which we may respond to this request:			
treet Address		CU e-mail address		
		7. 0.1		
City	State	Zip Code		
List requirement		t be no more than six (6) semester how	urs).	
•		Å	urs).	
•		Å	urs).	

I understand that submission of this form does not guarantee the request to participate will be granted. I will be informed in writing about the status of my request by the Registrar (Main Campus Candidates) or my Graduation Auditor (Extended & Graduate Candidates), after my request has been evaluated and reviewed by my adviser and the dean of my school.

I understand that if my request is approved I will be allowed to participate in only <u>one</u> Commencement program for the degree I am earning. If approved for participation in the May, June Camp Lejeune, or December Commencement, I understand that I will not be eligible to participate in any subsequent semester when I would have been eligible after having met all graduation requirements.

I understand that participation includes all appropriate programs and events ancillary to graduation.

I understand that I will not receive a diploma or my transcript will not reflect a degree earned, until I actually meet graduation requirements. Furthermore, I understand that I *must* re-file an Application for Graduation at the time I complete said requirements, so that a correct diploma may be issued to me.

I understand, for the ceremony that I will be participating in, that I will not be ranked with a class or receive graduation honors for which I may be eligible *until* I complete all requirements and re-file my application. Ranking is not retroactive.

If more than <u>six</u> semester hours are missing prior to commencement, this petition is automatically disqualified.

I understand that my Commencement participation request must be received by the Registrar by March 26 for Spring and October 26 for Winter, unless otherwise approved by my Dean & the Registrar. Our telephone number is 910-893-1265; our fax number is 910-893-1260. Our normal office hours are 8:30 am -5:00 pm Monday-Friday.

Student Signature	Date
Adviser's Signature	Date
Appropriate Dean's Signature	Date
OFFICE OF T	HE REGISTRAR NOTES
Approved Denied Date:	Continued on reverse side

To be considered for participation in the graduation program, potential candidates must have an adviser approved plan for degree completion:

For the Candidate: Please explain how and when you propose to complete the missing requirements for graduation:

Condidate's Standards and Date		
Candidate's Signature and Date Adviser's Comments:		
Adviser's Comments:		

If there are additional documents relative to this form please attach them and forward them to the Registrar's Office.