

**~APPLICATION FOR DEGREE~  
College of Sciences**

(1) Complete the form in ink. (2) Obtain the signature of your advisor. (3) Return the form to your department.

Student ID Number \_\_\_\_\_ Sciences \_\_\_\_\_  
College Curriculum Degree (major)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Degree to be awarded: (Circle One) Semester to be awarded: (Insert Year)  
 Bachelor of Arts Spring Semester \_\_\_\_\_  
 Bachelor of Science Summer I \_\_\_\_\_  
 Summer II \_\_\_\_\_  
 Fall Semester \_\_\_\_\_

Two or more degrees awarded on the same date? \_\_\_\_\_ (No) \_\_\_\_\_ (Yes)  
 If yes, names of additional degrees: \_\_\_\_\_

Do you have a minor? \_\_\_\_\_ (No) \_\_\_\_\_ (Yes) If yes, list title(s): \_\_\_\_\_

List course(s) with incomplete grade(s) and expected date of completion: \_\_\_\_\_

List courses in progress that are required for graduation (with credit hours):

Course	cr	Course	cr

List transfer course(s) in progress (with cr hrs) and name of institution(s): \_\_\_\_\_  
 \_\_\_\_\_

Indicate if you will complete requirements for any of the following:

- \_\_\_\_\_ Departmental Honors Program
- \_\_\_\_\_ CALS Honors Program
- \_\_\_\_\_ University Honors Program
- \_\_\_\_\_ University Scholars Program

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Advisor Approval: Signature of Advisor \_\_\_\_\_ Date \_\_\_\_\_

*Section for use by the department/college*

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Departmental Approval: \_\_\_\_\_  
 Signature/Director of Undergraduate Programs