OFFICE OF ADMISSIONS AND RECORDS  
~GRADUATION CLEARANCE FORM~

Part I. RECOMMENDATION FOR GRADUATION

Student’s Name: ________________________________

I, the undersigned, certify that I have carefully examined the program of study for the above named student and have that he/she has met the requirements of the Division of:
( ) Arts and Sciences
( ) Business & Computer Tech/Public Services
( ) Industrial & Related Technologies

I approve the program of study pursued by this student and recommend him/her as a candidate for graduation as of __________________ with a major in ____________________________.

It is understood that my recommendation is based on the fact that the student must complete satisfactorily in all courses now in progress and meet all other necessary requirements before the degree, diploma, or certificate is conferred.

Signed: ___________________________ Date: ___________________________

Academic Advisor

Signed: ___________________________ Date: ___________________________

Division Dean

Part II. NOT RECOMMENDING FOR GRADUATION

Student’s Name: ________________________________

I, the undersigned, certify that I have carefully examined the program of study and found that the above student has not met the requirements of the Division of ____________________________ and the College.

The above named student is not recommended for graduation due to the following reason (s):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signed: ___________________________ Date: ___________________________

Academic Advisor

Signed: ___________________________ Date: ___________________________

Division Dean