



APPLICATION FOR GRADUATION

Registrar's Office
256.726.7353
registrar@oakwood.edu

PRINT/TYPE your **NAME** exactly as you wish it to appear on your diploma _____ ID# _____

Application Date: _____

Local Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Email Address (<i>Oakwood University email address</i>)	Cell Phone	Work Phone	

DEGREE INFORMATION

Major(s) _____ **Concentration(s)** _____ **Minor(s)** _____

Expected graduation (Semester/Year: Fall, Spring, Summer & Year): _____ **Indicate catalog/bulletin to be used:** _____

I AM APPLYING FOR (Check only one):

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> BA-Bachelor of Arts | <input type="checkbox"/> BS-Bachelor of Science | <input type="checkbox"/> BM-Bachelor of Music | <input type="checkbox"/> BBA-Bachelor of Bachelor/Business of Administration |
| <input type="checkbox"/> BSW-Bachelor of Social Work | <input type="checkbox"/> AA - Associate of Arts | <input type="checkbox"/> AS-Associate of Science | <input type="checkbox"/> Certificate _____ |
| <input type="checkbox"/> MPH -Masters of Public Health | | <input type="checkbox"/> MBA-Masters of Business Administration | |

TO BE COMPLETED BY THE APPLICANT

Have you completed?

Outstanding Courses/Comments

- | | |
|---|--|
| Removed all incomplete Grades | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| An overall average of 2.0 CGPA | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Has a grade of "C" or better in Major and/or Minor | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Completed the Major and/or Minor Track | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Take the English Proficiency Exam | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Taken the Department Exit Exam | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is the student currently enrolled | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Substitutions (attach sheet indicating substitutions) | <input type="checkbox"/> Yes <input type="checkbox"/> No |

APPLICATION FOR GRADUATION (AFG)/FINAL YEAR SCHEDULE (FYS) TO BE COMPLETED BY THE STUDENT: List courses to complete degree.

Course #	Fall Course Schedule/Term: 2020 Course Title	Credit Hours	Course #	Fall Course Schedule/Term: 2020 Course Title	Credit Hours

Notice: Requirements approved as submitted on AFG/FYS. No changes made without approval of department chair. Any changes could delay your date of graduation.

Applicant's Signature _____	Date of Signature _____
Advisor's Signature _____	Date of Signature _____
Chairperson's Signature _____	Date of Signature _____
Minor Chairperson's Signature _____	Date of Signature _____

THE GRADUATION FEE IS NON-REFUNDABLE AND IS SUBJECT TO CHANGE WITHOUT PRIOR NOTICE. PAYMENT options: Mail Cashier Check/Bank Draft to: Oakwood University, ATTN: Student Accounts, 7000 University Blvd, Huntsville, AL 35896 OR contact Cashier's Office at 256.726.8429.

This application should be submitted at least one year prior to your planned term of graduation. Complete with Advisor/Department Chair and submit this form to: Registrar's Office in Cunningham Hall.

The following information is used to comply with federal, state and institutional reporting guidelines:

Date of Birth: _____ Sex: Female Male Race/Ethnic Origin: Black Caucasian Hispanic American Indian/Alaskan Asian/Pacific Islander