NOTICE OF INTENT TO GRADUATE

This form to be completed by student

Student can file after completing 80 hours of coursework and prior to completing the Request for Senior Audit. Students will need to save Intent to Graduate form and email as attachment or turn in with the senior audit request to Macie Reese in CASNR's Dean's Office for processing.

Today's Dat	e:			
Proposed Month and Year of Graduation:			□ May □ August	(Year)
Year of Cata	alog Used for Cou	rse Requirem	ents:	
Print full na	me <u>AS IT SHOUI</u>	LD APPEAR	ON DIPLOMA:	
			R	#
(First)	(Middle)	(Last)		
Major:			_Specialization: _	
Minor(s): (Approved Min	nor Form with Signatu	ıre must be on fi	le in CASNR Dean's	Office)
151 Hour Degree Program Only: ☐ Thesis Option			Additional/Otl	ner Degrees:
☐ Non-Thesis Option				(Name of Issuing Institution)
	□ MAB		☐ Bachelor _	(Name of Issuing Institution)
☐ Yes ☐ No	najor released to a		nmencement Prog	
Permanent A	Address (for maili	ng or aipioma	a ii necessary):	
	(Addre	ss, City, State an	nd Zip)	
Local Addre		ss, City, State an	nd Zip)	
Local Phone:E-Mail Address:				
(Student's Signature)				(Date Submitted)