SUNY COLLEGE OF ENVIRONMENTAL SCIENCE AND FORESTRY
OFFICE OF THE REGISTRAR
111 BRAY HALL
SYRACUSE, NEW YORK 13210

UNDERGRADUATE APPLICATION FOR GRADUATION

NAME_____
(print CLEARLY your name as you wish it to appear on your diploma and the convocation program)

STUDENT ID NUMBER_____

DEGREE SOUGHT_____ PROGRAM OF STUDY_____

EXPECTED DATE OF GRADUATION: December _____
May _____
August _____

MAILING ADDRESS FOR DIPLOMA: _____
(Diplomas are mailed after graduation. This address should be one which will not change for at least 6 months after graduation.) _____

_____

_____

PERMANENT MAILING ADDRESS: _____
(List here an address through which mail will **always** reach you. If this address is the same as above, write "same".) _____

_____

_____

Signature/Date:_____

HAVE YOU REVIEWED YOUR RECORD WITH THE REGISTRAR TO CONFIRM THAT YOU HAVE MET ALL REQUIREMENTS?

CONVOCATION PROGRAM: THE LISTING OF DEGREE CANDIDATES WILL BE GENERATED FROM THIS FORM. PLEASE NOTE, IF YOU DO NOT RETURN THIS FORM, YOUR NAME WILL NOT BE INCLUDED IN THE CONVOCATION PROGRAM.

OFFICE RECORD - CANDIDATES SHOULD NOT WRITE BELOW THE LINE

ordered_____ sent_____