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.**

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*OFFICE RECORD - CANDIDATES SHOULD NOT WRITE BELOW THE LINE*

ordered_____ sent_____