



Office of the Registrar
 Summerville Campus
 Rains Hall
 (706) 446-1430
 gradapp@augusta.edu

SUMMERVILLE GRADUATION APPLICATION

Graduation applications are due to the Registrar's Office by Fall Midterm **BEFORE** completion of requirements for Spring applicants, and by Spring Midterm **BEFORE** completion of requirements for Summer and Fall applicants. Part 1 must be completed by the student and submitted to the department of their major for the completion of Part 2. The completed form and any exceptions to degree or graduation requirements not previously applied to JagTrax must be submitted to the Registrar's Office for final processing. A new application must be completed if there are any changes to the information below. If this is an updated application, please highlight the changes.

PART 1: COMPLETED BY STUDENT

First Name: _____ Middle Initial: _____ Last Name: _____ Student ID: _____

Diploma _____ Phone Number: _____ Cell _____ Home _____

Mailing _____ Street Address _____ Email Address: _____

Address: _____ City _____ State _____ Zip Code _____ (After Graduation) _____

Program Completion Term: **Fall** **Spring** **Summer** **20** Degree: _____ Major: _____

Concentration (if applicable): _____ Minor (if applicable): _____

Are you applying for more than one degree, major, or certificate? **Yes** **No**

A separate application must be completed when applying for more than one degree, major, or certificate. Your Diploma Name must match on all additional applications.

Are you a part of the Honors Graduate Program or Honors Scholars Track? **Yes** **No**

The Honors Graduation Application must be submitted in addition to your graduation application.

Diploma Name: _____

Print your name as you want it to appear on your diploma. Your Diploma Name must match your name in POUNCE. If necessary, submit a name change to the Registrar's Office.

Are you a Legacy graduate? **Yes** **No**

A Legacy graduate is someone whose parent(s), grandparent(s), son(s), daughter(s) or sibling(s) graduated from Augusta University or one of her legacy institutions. If you believe you are a Legacy, please provide your relative's name, degree received and date of degree.

Commencement Policy: Students who complete requirements for graduation in the Spring term are eligible to participate in Spring (May) Commencement. Students who complete requirements for graduation in Summer or Fall term are eligible to participate in Fall (December) Commencement. Initial Here

Graduation Application Fee: Upon receipt of completed application, a \$50 non-refundable graduation application fee will be added in POUNCE. Payment is due at time of charge. Previous payment will only be moved once if application is updated to a new term. Initial Here

PART 2: COMPLETED BY DEPARTMENT

-List all incomplete coursework below, including prior, current, and future terms.

-Please attach a departmental tracksheet listing all coursework being used to fulfill graduation requirements.

Catalog Year: _____ Term _____ 20 _____ Term _____ 20 _____ Term _____ 20 _____

Catalog year refers to the course/degree requirements outlined for a specific academic year. A students' catalog year is typically listed as the academic year when they first enrolled. Consideration of a catalog year is very important! At times, it may be more advantageous for the student to follow a different catalog year, due to changes to a major from the time they first enrolled.	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
All degree requirements (courses, Legislative requirements, capstones, exit exams, portfolios, etc.) will be met by the grading deadline.	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

_____ Initial Here

Comments: _____

PART 3: REQUIRED SIGNATURES

Student Printed Name _____ Student Signature _____ Date _____

Advisor Printed Name _____ Advisor Signature _____ Date _____

Major Department Chair or Program Director Printed Name _____ Major Department Chair or Program Director Signature _____ Date _____

Minor Department Chair or Program Director Printed Name _____ Minor Department Chair or Program Director Signature _____ Date _____