

REQUEST FOR DEGREE CHECK

STUDENT ID NUMBER _____ DATE _____

Last Name First Middle Maiden

Local Address (Street, City, State) Zip Code Phone Number(s)

Permanent Address (Street, City, State) Zip Code Phone Number(s)

BIRTH DATE _____
Date of first enrollment at any college, junior college & including dual credits (semester & year) _____
Date of first enrollment at PSU (semester and year) _____

TYPE OF DEGREE: Bachelor of General Studies (BGS) (Emphasis) _____

CATALOG: _____

Expected Date of Graduation (Please select) Spring Summer Fall (Year) _____
(May) (May) (December)

NAME ON DIPLOMA _____
(How you want your name to appear on your diploma? - including any accent marks)

Diploma Mailing Address _____

City, State & Zip Code _____

Home Town and State (for commencement purposes) _____

*LIST ALL COLLEGES YOU HAVE ATTENDED: _____

*An official transcript from each college you have attended must be on file in the Registrar's Office before a degree check can be processed.

Approximate number of hours earned at a junior/community college _____

Approximate number of hours earned at a 4-year college to date _____

Number of hours in which you are currently enrolled at PSU _____

Number of hours currently enrolled at another school/PSU extension _____

Approximate total hours all together _____

DO YOU PLAN TO ATTEND THE NEXT SUMMER SESSION (Please select) Yes No Maybe

ARE/WILL YOU BE TAKING CLASSES OFF CAMPUS NOW OR BEFORE COMPLETEING YOUR DEGREE?

(Check) Yes ___ No ___ Maybe ___

If YES, What Course/Where? _____

AN OFFICIAL DEGREE CHECK/AUDIT will be mailed to you upon the completion of your degree check. **This is your official program to follow. It will be necessary that you file a new application if you change your degree, major, minor, option or catalog. Please inform us of any change of name or address.**

List Advisor's Name

Student's Signature

REMARKS may be listed on reverse side

DO YOU NEED A COPY SENT TO FINANCIAL AID (Yes) _____ (No) _____