

**You Must Complete On-Line Application. This Is a Worksheet ONLY**

Radford University Artis College of Science and Technology

**Worksheet for APPLICATION FOR GRADUATION**

**Please Meet with your Advisor to complete this worksheet and then complete On-Line Application.**

CIRCLE LAST TERM YOU WILL BE ENROLLED IN CLASSES:

FALL SPRING SUMMER Year: \_\_\_\_\_

**NAME:** Type or print name as it is to appear on your diploma.

\_\_\_\_\_ (First) (Middle) (Last)

**STUDENT ID#:** \_\_\_\_\_ **Advisor:** \_\_\_\_\_

**Address:** Your diploma will be sent to your permanent address on file with the University. Please be sure to update your permanent address in the Personal Information portlet in the MyRU portal. Contact the Registrar's Office if you need assistance.

**RU Email Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**DEGREE:** BA BS

**Catalog Year:**

2013-2014 \_\_\_\_\_ 2014-2015 \_\_\_\_\_ 2015/2016 \_\_\_\_\_ 2016/2017 \_\_\_\_\_ 2017/2018 \_\_\_\_\_

Are you currently REPEATING any classes? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please list class(es) \_\_\_\_\_

**1ST MAJOR:** \_\_\_\_\_ **Concentration(s):** \_\_\_\_\_

**2ND MAJOR:** \_\_\_\_\_ **2ND CONCENTRATION** \_\_\_\_\_

**MINOR(s):** \_\_\_\_\_

| Current Schedule |              |         | Remaining Classes |              |         |
|------------------|--------------|---------|-------------------|--------------|---------|
| Course & #       | Course Title | Credits | Course & #        | Course Title | Credits |
|                  |              |         |                   |              |         |
|                  |              |         |                   |              |         |
|                  |              |         |                   |              |         |
|                  |              |         |                   |              |         |
|                  |              |         |                   |              |         |
|                  |              |         |                   |              |         |

**Faculty Advisor's Signature:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Please retain this form for your records. You must complete the On-Line Graduation Application in order to be coded for graduation.**