

OAKWOOD UNIVERSITY **APPLICATION FOR GRADUATION**

PRINT/TYPE your **NAME** exactly as you wish it to appear on your diploma_

you wish it to appear on your diploma						Student ID#					
Address			SocialSecurity Number								
Local address:		Street/Route/Box #			Teleph	hone: Cell/Home		Work			
City Address		State	Zip								
Permanent addre		eet/Route/Box #	City	/		Sta	ate	Zip	Telephone		
E-Mail address (C	Dakwood	College official e-mail address):									
Major(s)		C	oncentra	ation(s)				Minor(s)			
Expected Gradua	tion (Sen	nester/Year: Fall, Spring, Summo	er & Yea	ar)		I	Indicate catalog	/bulletin year to	be used:		
(You may graduate	e using the	e catalog in effect the year you enro				e time of gr		, ,			
MA – Master	of Arts	BA – Bachelor of Arts		'm applyin chelor of So	í - T	,	chelor of Musi	c 🗌 BBA – Bact	nelor/Business Adminis	stration	
Bachelor/Soci					=	Certifica					
TO BE COMPLETED BY THE APPLICANT:				ve you com	pleted?	Outstan	ding Courses/C	'omments:			
Removed all incomplete grades			Yes		\dashv	Outstan		omments.			
 An overall average of 2.0 CGPA Use a set do of "C" as between Meior and (as Minor) 			Yes		\exists						
 Has a grade of "C" or better in Major and/or Minor Completed the Major and/or Minor Track 					\exists						
 Taken the English Proficiency Exam 			Yes Yes		\exists						
 Taken the Departmental Exit Exam 			Yes	E	╡						
 Is the student currently enrolled 			Yes		4						
 Substitutions (attach sheet indicating substitutions) 			Yes		=						
		-				COMBLET	ED BV THE S	TUDENT. List on	unas to complete doors		
AFFLICATION F		DUATION (AFG)/FINAL YEAR			IUBE						
Course #	Fall	Course Schedule /Term: Fall 20 Course Title	17	Credit Hours	Cour	se #	Spring Cou	rse Schedule/Terr Course Title		Credit Hours	
Notion Dominant	nto 0	Total ved as submitted on AFG/FYS. No	aherra	a modeiti	ont	vol of day -	utmont chain 4	Total	lolon nonn data af an I	otion	
•			U			-		• •		ation.	
Applicant's Signature Advisor's			-	-							
Date of Signature Date of S			of Signa	Signature			Date of Signature				
University, mail t planned term of gr NW, Huntsville,	to the add raduation. AL 3	E IS NON REFUNDABLE AN Iress listed below or make paym Complete with Advisor/Depart 5896. (FEE: Student Accoun ase see attached letter regarding	tent in the timent Clarks Officient	he Student hair and su ce, if mai	Account bmit thi	s Office. T s form to: de cashiers	This application Registrar's Of s check or n	should be submitt ffice, Oakwood U	ted at least one year prid Iniversity, 7000 Adven	or to your t ist Blvd,	
0		s used to comply with federal, state			porting gu	idelines:					
Date of Birtl	h		e/Ethnic		. Г	٦	Π				
/		Male Female	Black	Cauca	sian 🗋	Hispanic		n Indiana/Alaskan	Asian/Pacific Islar	nder	
For Office Use Only (Re	egistrar's Ol	ifice)				Fo	r Office Use Only (S	tudent Accounts)			
Date Received		Date Processed				Fee	e Paid		Date Fee Paid		