

Please type ALL information. Handwritten applications are no longer accepted.



Application for Graduation

I intend to complete my degree: (select only one)

Fall 20____ Winter 20____ Spring 20____ Summer 20____

STUDENT INFORMATION		
CWID:		
Tech E-Mail:		Permanent E-Mail:

NAME EXACTLY AS IT SHOULD APPEAR ON DIPLOMA		
First Name:	Middle Name:	Last Name:

STUDENT CONTACT INFORMATION (after graduation)		
Address:		
City:	State:	Zip:
Home Town (City/State or COUNTRY) for Commencement Program:		
Current Phone #:	Permanent Phone #:	

ACADEMIC PROGRAM INFORMATION (If you are receiving two degrees or if you are a double major, you must complete two separate applications)			
Degree:			
Major:			
Minor:			
Concentration:			
Attending:	<input type="checkbox"/> Main Campus	<input type="checkbox"/> Barksdale AFB	<input type="checkbox"/> Online Program

Are you currently enrolled at another university? Check one: Yes No

If Yes, complete the following:

College/University Name: _____

Course(s) you are registered for: _____

Will you need assistance at graduation? Check one: Yes No

Will you attend the Commencement Ceremony? Check one: Yes No

If No, you must complete the Absent from Commencement form on www.latech.edu/registrar

DEGREE CANDIDATE'S SIGNATURE

DATE

Pending completion of this term's coursework, this student is eligible for conferral of the degree listed above.	
_____ DEPARTMENT HEAD	Date: _____
_____ DEAN OF COLLEGE	Date: _____

Return completed form to your designated college

Revised 5/24/2018