LOUISIANA TECH
Office of the
UNIVERSITY REGISTRAR

Application for Graduation

BARKSDALE PROGRAM
UNIVERSITY REGISTRAR

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

☐ **Fall 20**_____ ☐ **Winter 20**___ ☐ **Spring 20**_____ ☐ **Summer 20**_____

STUDENT INFORMATION

CWID:	

First Name:	Middle Name:	Last Name:
Tech E-Mail:	Permanent E-Mail:	

NAME EXACTLY AS IT SHOULD APPEAR ON DIPLOMA

Full Name:

STUDENT CONTACT INFORMATION (after graduation)

Address:

City:	State:	Zip:

Home Town (City/State or City/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)

College:	
Degree:	
Major:	
Minor:	
Concentration:	
Certificate:	
Attending:	☐ Main Campus ☐ Barksdale AFB ☐ Online Program

Are you currently enrolled at another university? Check one: ☐ No ☐ Yes   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 *https://www.latech.edu/registrar-office/*

DEGREE CANDIDATE'S SIGNATURE   **DATE**

Pending completion of this term's coursework, this student is eligible for conferral of the degree listed above.

Is student eligible for a Graduate/Undergraduate Certificate? ☐ Yes ☐ No Certificate Title:_____

DEPARTMENT HEAD   **DATE**

DEAN OF COLLEGE   **DATE**

Revised 5/27/2022

Return completed form to your designated college.