LOUISIANA TECH
Office of the
UNIVERSITY REGISTRAR

Application for Graduation

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**

Return completed form to your designated college.

Revised 5/27/2022