



**INSTRUCTIONS**

- Apply for graduation **one semester prior** to completion. The preferred deadline for submitting a graduation application is the **9th Friday of the previous term** after classes begin.
 

<i>Graduating Term</i>	<i>Submit Application</i>
Spring	Fall
Summer	Spring
Fall	Spring
- Meet with your advisor to complete your application and degree evaluation. Use a separate application for multiple degrees.
- Ensure your permanent address is up-to-date in Banner Web. This is the address where your diploma will be mailed.
- Bring your completed graduation application and DegreeWorks printout to Academic Support. An Academic Counselor will review the application to ensure you are on track to graduate.
- If you submit your graduation application by the 9th Friday of the prior term, you will receive Priority 0 registration status.

**DEGREE INFORMATION**

Graduating Term: \_\_\_\_\_ Year: \_\_\_\_\_

Degree Type:  Bachelor's  Associate  ASN  AFA Program: \_\_\_\_\_

Are you applying for a Minor?  Yes (please complete and attach Minor Application)  No

If not completing final courses/graduation requirements at ABAC, provide school name: \_\_\_\_\_

**STUDENT INFORMATION**

Site Location: \_\_\_\_\_ Are you a veteran?  Yes  No

Name: \_\_\_\_\_ ID# \_\_\_\_\_  
LEGAL NAME ONLY - NO NICKNAMES - Print name EXACTLY as it should appear on the diploma.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

ABAC Email: \_\_\_\_\_

Official communication is only sent to an ABAC email address.

**COMMENCEMENT INFORMATION**

Are you participating in the Graduation Ceremony?      YES      NO

Note: Graduation Ceremonies are held on the Tifton Campus.

Do you have a mobility impairment that requires the use of an inclined plane (ramp) instead of stairs?      YES      NO

**ADVISOR & SCHOOL APPROVAL:**

\_\_\_\_\_  
Advisor's Name Printed

\_\_\_\_\_  
Signature of Academic Advisor

\_\_\_\_\_  
Date

Received by Academic Support:

Date: \_\_\_\_\_ By: \_\_\_\_\_ Signatures: \_\_\_\_\_ DegreeWorks: \_\_\_\_\_

**TO BE COMPLETED BY ACADEMIC SUPPORT :**

Items noted below indicate graduation requirement(s) which are not met. See your Academic Advisor if you have questions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1<sup>st</sup> Review \_\_\_\_\_ Date \_\_\_\_\_ Final Review \_\_\_\_\_ Date \_\_\_\_\_

Posted in SHADEGR \_\_\_\_\_ Date Degree Recorded \_\_\_\_\_

Email sent: \_\_\_\_\_ Advisor \_\_\_\_\_ Student \_\_\_\_\_