Andrew College Office of the Registrar 501 College Street Cuthbert, GA 39840 registrar@andrewcollege.edu

APPLICATION FOR GRADUATION

The graduation application process is initiated by the student with their academic advisor. A completed plan of study must accompany the submitted application.

Student ID Last Nam		e First Name			MI
Graduation Term:	SPRING	SUMMER	FALL	Graduation Year:	
Degree and Major (C	Check):				
Bachelor of Science Business Administration Elementary Education Organizational Leadership Associate of Arts Communication History		Associate Degree in Nursing Associate of Science Agribusiness Applied Behavioral Health Athletic Training Biology Business Administration		Healt Mathe Physic th Social Sustain	h Science ematics cs ratory Therapy I Science inable Agriculture
Liberal Arts Literature Music Theatre Arts Visual Arts		Cancer Re Chemistry Education Engineerir Forestry		Cance Churc	er Registry Management
If all coursework is in Google form will col					
Diplomas will be mathe term.	iled to the home	address listed	in Empower	approximately 6-8 w	veeks after the end of
Upon submitting this catalog for exact fee) whether or not they	will be charged	to the student	account. Th	is fee must be paid b	
Student's Signature		Date			
Academic Advisor's Signature		Date			
**************************************		******	******	********	*************09/21
Date Rec'd					
Plan of Study attached: Y N		Email Link to Google form: Y N			
All coursework in progress: Y N			Email about missing reqs: Y N		
App entered into Em		Date:			