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	FALL Graduation Year:	
Degree and Major (C	Check):				
Bachelor of Science Business Administration Elementary Education Organizational Leadership Associate of Arts		Associate Degree in Nursing Associate of Science Agribusiness Applied Behavioral Health Athletic Training		Health S Mathem Physics	Science atics ory Therapy
Communication History		Biology Business Administration			ble Agriculture
Liberal Arts Literature Music Theatre Arts Visual Arts			gistry Managem	Cancer I Church	Registry Management Music Technician Assistant
				nt to your Andrew Co	
Diplomas will be mathe term.	iled to the home	address listed	in Empower a	approximately 6-8 wee	eks after the end of
	will be charged t	to the student	account. This	n-refundable graduations fee must be paid by A	
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 Empower:		Date:			