



Application for Degree

Office of Academic Records

Name _____ M# _____
Last First Middle

Current Address _____ Residence Hall _____

City _____ State _____ Zip _____

Cellular Phone _____ Alternate Phone _____

E-Mail Address _____

Major _____

The information below is being requested to further verify the correct printing of your name on the graduation program. Please write (PRINT) clearly and **return this form** to the Office of Academic Records on OR before February 1.

[December graduates should follow the senior deadline check sheet for modified dates.]

Name to be used on the diploma **Full Legal Name is required.** **Print Clearly.**
Please write phonetic enunciation above name (if applicable) Example: Briana "bree - on - nah"

First Name	Middle Name	Last Name
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HOMETOWN _____
(Where are you from even though you may be living in Birmingham now?)

Permanent Address (after graduation or next of kin) If the same as above, disregard.

Street _____

City _____ State _____ Zip _____

Cellular Phone _____ Other Phone _____

E-mail Address _____

Important Note: All graduation mailings such as your degree, photos and special orders **will be** mailed to the permanent address above. Graduation requirements approved after deadline dates may delay the issuance of the degree which will be mailed. If it is necessary to extend your graduation date, please notify the Registrar immediately and resubmit an updated application to modify your graduation date.

If you are requesting additional copies of your degree at the time of graduation, receipt of payment must be made by **February 1** and taken to the Office of Academic Records. Copies requested at the time of graduation will include a degree cover. Thereafter, covers are only available on a first come first serve basis.

_____ copy (ies) @ \$25.00 each = \$ _____ Total **[attach pre-paid receipt]**