



# CHANGE IN GRADUATION

\_\_\_\_\_  
Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Student I.D. Number

I originally applied for graduation in \_\_\_\_\_; however, I have not completed  
Semester  
all the requirements for \_\_\_\_\_.  
Program

I am enrolled in the following courses for \_\_\_\_\_ to complete my program:  
Semester

_____	_____
_____	_____
_____	_____

My new expected graduation date is \_\_\_\_\_.

I understand that if the above information is incorrect I may be subject to repayment for any or all financial aid received for this additional semester.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date