



# University of South Alabama

## LATE GRADUATION APPLICATION PETITION

390 Alumni Circle, Suite 1100, Meisler Hall Mobile, AL 36688

Phone: 251-460-6251 Fax: 251-460-7738 Email: registrar@southalabama.edu

The Late Graduation Application Petition is to be used by students who have missed the published deadline for completing an online application. Submitting a late graduation application petition does not guarantee acceptance by the student's college. **This form is to be submitted by the student to their academic college.** Upon the approval of the student's academic college, the late graduation petition and application will be submitted to the Office of the Registrar, graduation@southalabama.edu.

To apply for graduation, students must meet the following requirements:

Level	Earned Hours	Institutional GPA
Undergraduate Students	90	1.80
Graduate Students	15	2.80
Professional Students	30	2.80

Students should apply for the term in which all degree requirements will be met. Students who apply and do not complete in the term listed below will not be assigned a future time ticket until the end of the term. These students are required to complete a new application and will be charged an additional \$50 fee. Students who have missed benchmark dates may not be listed in the commencement program.

### COLLEGE REVIEW

(To be completed by College)

The college will complete this section using the degree audit. If the petition is denied, please notify the student and advise them of the online application dates for the next semester.

Student Name: \_\_\_\_\_

Jag Number: \_\_\_\_\_

Program information is accurate.

Program change form is attached because correction is needed.

Credits Applied from Audit: \_\_\_\_\_  
(Must meet guideline above)

GPA from Audit \_\_\_\_\_  
(Must meet guideline above)

% Complete from Audit \_\_\_\_\_

I accept the student's late graduation application petition for \_\_\_\_\_ semester.

College Representative Name: \_\_\_\_\_

College Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# University of South Alabama LATE GRADUATION APPLICATION

This form is to be submitted by the student to their academic college if they have missed the published graduation application deadline. Completion of this form does not guarantee the petition will be accepted for the requested term. Approval of the student's request is based on the decision made by their academic college. Students who have missed benchmark dates may not be listed in the commencement program.

**Student ID:** J00 \_\_\_\_\_  Undergraduate  Graduate  First Professional / Ph.D.

### DIPLOMA INFORMATION

**Print name as you want it to appear on diploma:** Please be careful to indicate spaces, capital or small letters, and accent marks. The name(s) on your diploma must be your official name on file with the Registrar's Office.

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
**FIRST MIDDLE LAST**

### GRADUATION INFORMATION

**Select the semester you expect to complete all degree requirements** (Check only one and enter the year)

**NOTE:** Registration time tickets will not be assigned after the term selected. After end-of-term processes are complete, if ALL degree requirements are not met, your graduation application will be inactivated. To be eligible for a future graduation term, a new application and fee will be required.

Fall 20\_\_\_\_\_  Spring 20\_\_\_\_\_  Summer 20\_\_\_\_\_

### COLLEGE/SCHOOL

Allied Health  Arts & Sciences  Business  Computing  Education  Engineering  Medicine  Nursing

### PROGRAM INFORMATION

**Major(s):** 1. \_\_\_\_\_ [ ] 2. \_\_\_\_\_ [ ]  
**Minor(s):** 1. \_\_\_\_\_ [ ] 2. \_\_\_\_\_ [ ]  
**Concentration(s):** 1. \_\_\_\_\_ [ ] 2. \_\_\_\_\_ [ ]  
**Concentration(s):** 1. \_\_\_\_\_ [ ] 2. \_\_\_\_\_ [ ]  
**Degree(s):** 1. \_\_\_\_\_ [ ]

**Registrar's Use only** [CATALOG TERM \_\_\_\_\_] [PROGRAM CODE: \_\_\_\_\_]

### MAILING ADDRESS FOR DIPLOMA

Diplomas will be mailed approximately 4 weeks after the end of the semester. Diplomas will be held until all obligations to the University are cleared.  
**Enter address for mailing your diploma:**

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
**City:** \_\_\_\_\_ **State /Province:** \_\_\_\_\_  
**Zip/Postal Code:** \_\_\_\_\_ **Country/Nation:** \_\_\_\_\_

**NOTE:** After submission of this form the diploma address change can only be changed by using the Diploma Address Change Form located on the Registrar's website. The form must be submitted by the posted deadline.

### READ AND SIGN:

A \$50 graduation application fee will be charged to your student account.

Signature Required: \_\_\_\_\_ DATE: (MM/DD/YY) \_\_\_\_\_  
Phone: \_\_\_\_\_ USA Email: \_\_\_\_\_  
Do you plan to attend the graduation ceremony?  Yes  No

**REGISTRAR'S USE ONLY** Application Received: \_\_\_\_\_ Date: \_\_\_\_\_ [Student notified application processed: \_\_\_\_\_]  
Coded: \_\_\_\_\_ Date: \_\_\_\_\_ Charged: \_\_\_\_\_ Checked: \_\_\_\_\_ Date: \_\_\_\_\_  
File Inactivated: \_\_\_\_\_ Per: College / Student / EOT \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Changed / Verified: \_\_\_\_\_ / On File