

Office of the University Registrar 863.874.8540 | Room 2038/2040 4700 Research Way Lakeland, FL 33805-8531 Registrar@FLPoly.org

Print Student Name:_		Requested Graduation Date: Spring Summer Fall Year 20	
Student Email:	@flpoly.org		

Graduation Application

Student to complete steps 1-4 and submit the completed pages 1 and 2 of this form to the Office of the

University Registrar by the "Graduation Application Deadline" indicated in the Academic Calendar. Student should allow at least two weeks for the Faculty Advisor to complete step 2.					
Step 1. Student must complete step 1 by readin below.	g and initialing each statement in this section	and signing			
and gown orders and more.	for instructions on how to apply for commencement, ticket in				
I have checked my unofficial transcript to ensure that I wil	l have completed all of the required courses/credits prior to ap	plying for graduation.			
I have checked my unofficial transcript to ensure that I have cumulative GPA or better (Graduate).	ve a 2.00 GPA or better in my major and cumulatively (Undergi	raduate) or a 3.00			
I have checked my unofficial transcripts for Incomplete an	d NR grades. It is my responsibility to contact the professor to	finalize these grades.			
If I completed courses at another institution, I requested that an official transcript of those courses be sent to the Office of the University Registrar. The Office of the University Registrar must receive the transcript before the Graduation Application Deadline.					
The name in my CAMS account is the name I want printed on my diploma and in the Graduation Commencement Program. If my name is incorrect in my CAMS account, then I need to submit a Request for Change or Correction of Name Form and any supporting documentation to the Office of the University Registrar before the "Graduation Application Deadline."					
I understand that all graduation correspondence will be se contact the Help Desk at 863-874-8888 or email <u>helpdesk@flpoly</u>	ent to my Florida Poly email account, and if I have issues access <u>v.ora</u> .	sing my account I need to			
I understand that participating in the commencement cere	emony does not entitle me to a degree from Florida Polytechni	c University.			
I understand that I must satisfy any outstanding financial or other obligations to the University before I will be provided my degree, diploma, or transcripts.					
I understand that if I need to request a transcript with my degree listed, I will need to select "Hold for Degree Entry" when I complete the Official Transcript Request form.					
I understand that this Graduation Application must be submitted to the Office of the University Registrar before the "Graduation Application Deadline" as listed in the Academic Calendar.					
I understand that my failure to meet all required deadlines may result in my name not being listed in the commencement program, my participation in the commencement ceremony being denied, a delay in the awarding of my degree and posting of the awarded degree to my transcript, and a delay in the mailing of my diploma.					
By signing below, I agree that I have read the statements listed above and that my failure to comply with these terms may result in my being denied graduation or my graduation date being moved to a later date than the one for which I have applied.					
Student Signature	Date				
Step 2. To complete step 2, student must get Fa	· · · · · · · · · · · · · · · · · · ·				
must complete sign this section and return this page to the student. Student should allow two weeks for Faculty Advisor to complete and return this page to the student. Faculty Advisor select one:					
☐The student needs to complete the following in order to	-				
☐The student has completed all program requirements as	s of the following date:/	·			
Print Faculty Advisor Name Facu	lty Advisor Signature Date				



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Print Student Name:		Requested Graduation Date: Spring Summer Fall Year 20
Student Email:	@flpoly.org	

Graduation Application Continued

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Step 3. To complete step 3, student must complete the following section.						
Student UID Number:	Phone Number:					
Mailing address to use for mailing of diploma, which will be maile	ed 6-8 weeks after graduati	on:				
\square Sent to my permanent address as listed in my CAMS account	OR Send to the a	ddress below:				
Street						
City	State	Zip				
Date expected to complete graduation requirements: Spring	Summer Fall	Year: 20				
Undergraduate Computer Engineering Electrical Engineering Mechanical & Industrial Engineering Advanced Technology Science & Technology Management Computer Science & Information Technology Are you currently enrolled as a transient student at another institution? Yes Note: the Office of the University Registrar must receive an official transcript from the institution you are currently enrolled in as a transient student prior to commencement. Do you plan to participate in the commencement ceremony? Yes No I understand that my graduation is contingent upon my successful completion of all college or program requirements. I further understand that I must meet any and all of my financial and other obligations to Florida Polytechnic University in order to receive my degree/diploma.						
Student's Signature By signing above, you authorize your inclusion in commencement □ Exclude me from commencement publications and news release		Date ses unless you check this box:				
Step 4. To complete step 4, student must review steps 1-3 and ensure this Graduation Application is complete, accurate, and signed. Student must submit this Graduation Application to the Office of the University Registrar by the "Graduation Application Deadline" indicated in the Academic Calendar.						
FOR REGISTRAR OFFICE USE ONLY. Date received:						
Required Credits Met□ Honors Status□ Summer Enrol	lment Requirement Met□	Foreign Language Requirement Met□				
Overall GPA: Degree Posting Date:	Date Diploma Mailed	:				
Comments:						
Certified by:		Date:				