# GRAMBLING STATE UNIVERSITY
# GRAMBLING, LOUISIANA

**APPLICATION FOR UNDERGRADUATE DEGREE**

_____
**Date**

PLEASE TYPE NAME IN FULL **YOUR DIPLOMA WILL BE ORDERED AS YOUR NAME IS SPELLED ON THIS FORM.** IF YOU HAVE AN UNUSUAL NAME TO PRONOUNCE, PLEASE SUBMIT A PRONUNCIATION GUIDE TO THE DEAN OF YOUR COLLEGE TO INSURE THAT YOUR NAME IS PRONOUNCED CORRECTLY AT COMMENCEMENT.

_____
First Middle Last

Major:_____Concentration:_____

Minor:_____

This application applies to this requirements for the degree of (Check one)

☐ **Certificate** ☐ **A.A** ☐ **A.S.** ☐ **B.A.** ☐ **B.M.E.** ☐ **B.S.** ☐ **B.S.N.** ☐ **B.S.W**.

In the College/School of ☐Business ☐ Education ☐Arts & Sciences ☐ Professional Studies
**at the end of the (Check One)** ☐ **Fall** ☐**Spring** **20_____**

**Students who are currently enrolled in another college or university, please fill in the following:**

College or University:_____

**(A COMPLETE OFFICIAL TRANSCRIPT MUST BE IN THE REGISTRAR'S OFFICE AT THE SAME TIME GRADES ARE DUE).**

Date course will be completed_____

Courses for which registered: (**Do not list courses for which registered at GSU)**

| Course No. | Description | Sem. Hrs. Credit |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

I certify that the degree, major, concentration, and minor shown above are listed as they appear in the _____Grambling State University catalog,
**Year**
under which the student is eligible to receive a degree.
_____ hours are required for the degree.

_____
Signature of Department Head Date

_____
Signature of Academic Dean Date

_____
Signature of Vice President for Academic Affairs Date

I accept the responsibility for understanding and meeting all requirements for my degree.

_____
Signature of Candidate

_____
Student ID Number/Social Security Number

**LOCAL MAILING ADDRESS OF CANDIDATE:**

_____
Number and Street

_____
City State Zip Code

**HOME ADDRESS OF CANDIDATE**

_____
Number and Street

_____
City State Zip Code

_____
Local Phone Number Home Phone Number

_____
Cell Phone Email Address

**ORIGINAL – REGISTRAR'S OFFICE**

Revised as of 050211

Print