

**SUL ROSS STATE UNIVERSITY-RIO GRANDE COLLEGE
APPLICATION FOR GRADUATION**

Today's date _____

I am applying for graduation in the following semester and year: Fall _____ Spring _____ Summer _____ Year _____

Social Security No. _____ Student ID No. _____

Name as you want it to appear on your diploma. Name must match your name on Banner. Student may use a combination of maiden name and married name. No nicknames allowed.:

Name _____

Mailing Address _____ City _____ State _____ ZIP _____

Home phone _____ Cell Phone _____

Sul Ross Email _____

Degree you are applying for: (choose one)

BA _____ BS _____ BBA _____ BAS _____ BSN _____ MA _____ MBA _____ MED _____ MS _____

Major _____ Minor _____

I am the first person in my family to attend college Yes _____ No _____ (This question is required by direction of the 75th Texas Legislature)

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I am currently enrolled in the following courses at the named institutions:

Classes at Sul Ross-Rio Grande College

Classes at other institutions

Class	Instructor
_____	_____
_____	_____
_____	_____
_____	_____

Class	Institution
_____	_____
_____	_____
_____	_____
_____	_____

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There is no summer graduation ceremony. Summer graduates will be included in December's ceremony.

I will attend commencement _____ I will not attend commencement _____

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If you would like an announcement sent to your hometown newspaper, please complete the information below. If this is left blank, no information will be sent.

Name of paper _____ Location _____

Name of paper _____ Location _____

How you want your name to appear _____

Additional information you may want included in your announcement (not required) Where you currently live _____

Spouse's name _____ Names of both parents _____

Name of town/city where parents live _____ List parents (check one) Together or separately

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STUDENT SIGNATURE _____

Return completed form to the cashier on your campus with your payment. You may fax it, but follow with a phone call to give payment information.

Del Rio 830-703-4828 fax: 830-703-4804
Eagle Pass 830-758-5042 fax: 830-758-5019
Uvalde 830-279-3006 fax: 830-279-3010

FOR OFFICE USE ONLY			
RECEIPT NO. _____	DATE _____	Check all that apply	
TOTAL FEE PAID _____		GRADUATION FEE	\$30.00 _____
ADMISSIONS & RECORDS _____		LATE FEE	25.00 _____
Revised August 2017		REAPPLICATION FEE (insert fee)	5.00 _____