

Petition for Graduation

Completion and submission of this form is required to process your degree and transcripts upon completion of your program. Please complete and secure the appropriate signatures, Thank you

Graduate Clearance Form should be turned in prior to or no later than the last week of your last class

Expected Graduation Date (not Graduation Ceremony):
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Program of Study:

First Name:	Last Name:
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Current Mailing Address (street/city/state)
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Email:	Schiller Email:
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Cell phone:	Home phone:
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International Student:	International Student: Will you apply for OPT:
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International student: I have (student/graduate) met with the Registrar regarding OPT application: Yes/ No

Alternate Contact (Required) *Family member that can receive an important message or document for you.*

Name:	Relationship:
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Cell phone:	Email:
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Mailing Address:

Student/Graduate Signature (Type if emailing)
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Do you plan to participate in the Graduation Ceremony?	Campus:
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SIU Administration Selection: (Required Signatures)

Financial Aid Officer:	Date:
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Business Manager:	Date:
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Registrar:	Date:
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Registrar: The student above will complete all required class by this date:
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(The following must be completed prior to receiving the CS signature)

Resume Submitted: Yes/No	Resume Approved by CS Department:
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Career/Student Services:	Date:
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Notes:

Graduate folder paperwork submitted (Exit, Survey, Placement form)

APPROVED to Process:	If No HOLDING For:
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