South Carolina State University
Application for Degree

OFFICE OF THE REGISTRAR
POST OFFICE BOX 8104 ✧ 300 COLLEGE STREET, NORTHEAST
ORANGEBURG, SC 29117-0001 ✧ (803) 536-7185 ✧ Fax: (803) 536-8602

❑ Undergraduate
❑ Graduate

❑ December
❑ May
❑ July
Year _____

SECTION I (TO BE COMPLETED BY THE STUDENT)

_____ Major _____ Minor _____
Campus Wide ID

Have you applied for graduation before? Yes ___ No ___ Term _____
Telephone (____) _____ **Did you March? Yes _____ No _____ Term _____**

The Graduation Application Fee is $100.00-non-refundable and non-transferable. The Late Application Fee is $25.00 (please see Academic Calendar for filing period). The Graduation Application Fee does not include Academic Regalia. Effective immediately for the May 2011 Commencement.

VERY IMPORTANT: Your application for graduation is NOT valid unless the original copy is signed, graduation fee paid and returned to the Registrar's Office for processing. Diplomas will be mailed 30 working days after commencement to the permanent address listed on your Graduation Application.

Name _____
First Middle Maiden Last (Jr., etc.)

Permanent
Address _____ City _____ State _____ Zip Code _____

Local
Address _____ City _____ State _____ Zip Code _____

E-Mails will be sent to your CAMPUS e-mail address ONLY.
E-mail Address _____

***PRINT NAME BELOW EXACTLY AS YOU WISH IT TO APPEAR ON DEGREE**

_____
First Middle/Maiden Last (Jr., etc.)

***(Documentation is required for a Name Change. Please attach as necessary.)**

SECTION III (COMPLETED BY CASHIER)

GRADUATION FEE DATE

$_____ _____

CASHIER: _____

DEGREE SOUGHT:

- ❑ Bachelor of Arts
- ❑ Bachelor of Science
- ❑ Bachelor of Science in Nursing
- ❑ Bachelor of Social Work
- ❑ Master of Arts
- ❑ Master of Arts in Teaching
- ❑ Educational Specialist
- ❑ Master of Education
- ❑ Master of Science
- ❑ Master of Business Administration
- ❑ Doctor of Education

SECTION II (TO BE COMPLETED BY THE STUDENT'S CHAIRPERSON OR DEAN: *FOR UNDERGRADUATE STUDENTS ONLY*)

COURSE ID	COURSE TITLE	CREDITS

ENGLISH PROFICIENCY EXAM: PASSED (Y OR N) _____ DATE _____

FUNCTIONAL GRAMMAR: PASSED (Y OR N) _____ DATE _____

List course(s) presently taken at another Institution:
INSTITUTION: _____ COURSE(S):_____

TO BE APPROVED BY CHAIRPERSON_____ DATE_____

SECTION IV (TO BE COMPLETED BY GRADUATE DEAN: *FOR GRADUATE STUDENTS ONLY*)

CLEARED FOR GRADUATION: ❑ YES ❑ NO
IF NO, REASON: _____

_____

SIGNATURE, GRADUATE DEAN_____ DATE _____

SECTION V (TO BE COMPLETED BY THE STUDENT)
I understand if I do not complete all the requirements for the major and minor listed above, in addition to the General Education and Bachelor's/Master's/Doctorial degree requirements as outlined in the Undergraduate and Graduate Catalogs, I will not be cleared for graduation, and I will not be able to participate in commencement exercises.
STUDENT'S SIGNATURE_____ **DATE**_____