

Registrar's Office • 5345 Atlanta Hwy • Montgomery, AL 36109-3398 • 334-386-7244 (FAX) • E-mail: registrar@faulkner.edu

**APPLICATION FOR DEGREE CONFERRAL
UNDERGRADUATE PROGRAMS**

CIRCLE YOUR ANTICIPATED TERM OF GRADUATION: AUGUST - DECEMBER - APRIL

PRINT CLEARLY (LEGAL STUDENT NAME WILL BE PRINTED ON DIPLOMA AS LISTED IN OUR ACADEMIC SOFTWARE.)

FIRST MIDDLE LAST SUFFIX

STUDENT ID # _____ DAYTIME PHONE CONTACT (_____) _____ - _____

DIPLOMA MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

DEGREE AND MAJOR (PLEASE CHECK)

- ☐ ASSOCIATE OF ARTS
- ☐ ASSOCIATE OF SCIENCE MAJOR _____
- ☐ BACHELOR OF ARTS MAJOR _____ MINOR AND/OR SECOND MAJOR _____
- ☐ BACHELOR OF SCIENCE MAJOR _____ MINOR AND/OR SECOND MAJOR _____

ONE YEAR DEGREE COMPLETION PROGRAMS

- ☐ BBA - BACHELOR OF BUSINESS ADMINISTRATION Emphasis _____
- ☐ BCJ - BACHELOR OF SCIENCE IN CRIMINAL JUSTICE
- ☐ BSB - BACHELOR OF SCIENCE IN BUSINESS Emphasis _____
- ☐ HRM - BACHELOR OF SCIENCE IN HUMAN RESOURCE MANAGEMENT Emphasis _____

APRIL 28, 2017 - ANNUAL COMMENCEMENT EXERCISE (PLEASE CIRCLE)

- YES** I WILL BE PARTICIPATING IN THE ANNUAL COMMENCEMENT EXERCISE.
- NO** I WILL NOT BE PARTICIPATING IN THE ANNUAL COMMENCEMENT EXERCISE.

BY SUBMITTING THIS APPLICATION, I HEREBY AFFIRM THAT ALL INFORMATION SUPPLIED FOR GRADUATION IS COMPLETE AND ACCURATE. I ALSO AGREE TO PAY **\$150.00 NON-REFUNDABLE DEGREE APPLICATION FEE** WHETHER PARTICIPATING IN THE ANNUAL COMMENCEMENT EXERCISE OR NOT. THE FEE DOES NOT INCLUDE YOUR REGALIA (Cap/Gown). I ALSO UNDERSTAND THAT SHOULD I NOT GRADUATE IN THE TERM IDENTIFIED, I MUST REAPPLY (IN WRITING) FOR GRADUATION IN A SUBSEQUENT TERM AND PAY **\$15.00 REAPPLICATION FEE**.

PAYMENT: www.faulkner.edu/Quick Links/Online payments

Confirmation number: _____

STUDENT SIGNATURE _____

DATE _____