Art Academy of Cincinnati

Application for Graduation – Undergraduate and Graduate

PLEASE PRINT

Applying for Graduation Year 20____

Graduating Term: ◯ spring (May) ◯ fall (Dec) ◯ summer (Aug)

Name: _____

My name should appear on my diploma and in the Commencement program as follows:

_____ _____ _____

(First) (Middle) (Last)

My name is pronounced (Phonetic spelling please)

_____ _____ _____

(First) (Middle) (Last)

I am applying for the following degree: ☐ Bachelor of Fine Arts

☐ Master of Arts ☐ Associate of Science

My Major is: _____ Additional Majors: _____

Minor, if applicable: _____ Additional Minors: _____

Are you marching in the graduation ceremony? ☐ Yes ☐ No ☐ Unsure

Please provide the address for your place of residence for after graduation:

_____

(Address) (City) (State) (Zipcode)

Phone: (_____) - _____ - _____ Personal Email: _____

I understand that I will NOT be eligible to graduate until I have fulfilled the following obligations:

Please check each item:

- ☐ Paid all outstanding tuition & fees
- ☐ Completed total number of credit hours in required areas as per degree audit/catalog
- ☐ Senior Thesis/Review Complete
- ☐ Exit interview with Financial Aid office if necessary
- ☐ Official transcripts for transfer credit on file
- ☐ Cumulative Grade Point Average of 2.00 or above
- ☐ Completion of all requirements for degree

_____ _____

Student's signature Date

Please return submit completed form to the Registrar's Office (or Registrar mailbox)

Office: S265 Email: registrar@artacademy.edu Phone: 513-562-8749