

# COLLEGE OF ENGINEERING GRADUATION CHECKLIST - GRADUATE STUDENTS

Last Name:		First Name:	
Student U#:		E-mail Address :	
Graduating Term and Year:		Catalog Year:	
Department Name :			
Degree Sought :			
Concentration(s) (If applicable) :			

List courses in graduating term:  
 (minimum 2 thesis/dissertation hrs. for MS thesis/PhD students; minimum 2 graduate level hrs. for non-thesis MS students)

3-Letter	Course Subject & Number (example: CGN 7980)	Course Title	Credit hrs
1.			
2.			
3.			
4.			
5.			

Student initial s, indicating agreement :

\_\_\_\_ I have applied for graduation through Oasis.

\_\_\_\_ I understand any incomplete, missing , or non -approved information may result in graduation DENIAL.

\_\_\_\_ I understand that I am responsible for knowing and meeting the degree and graduation requirements.

\_\_\_\_ I have read the information on the next page .

6 W X G H Q W ¶ V 6 \_\_\_\_\_ Date: \_\_\_\_\_

<b>TO BE COMPLETED BY GRADUATE PROGRAM DIRECTOR AFTER STAFF FINAL REVIEW</b>	
<p style="text-align: center;"><b>Award F</b></p> <p>The student has met all degree requirements and the degree can be awarded.</p>	<p style="text-align: center;"><b>Deny F</b></p> <p>T Reason(s) for denial:</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>

TO BE COMPLETED BY COLLEGE OFFICE

College Certifying Officer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Students keep a copy of the checklist and this page for your records.

**Students Must Check:**

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Major/Concentration(s): Degree information, including Major and Concentration(s), must be correct in Oasis **before**