

GRADUATION INSTRUCTIONS

If you have completed (or in last term) all requirements for your degree you must apply for graduation. An Application for Graduation (below) must be completed and submitted to the Office of the Registrar. The deadline for applications is the first week of your last term. There will be a \$25 late fee for applications received after the first week. An audit of your coursework will be done to verify that you have completed all requirements for your degree. You will be notified of the results of the audit before the end of the Drop/Add period. If needed, recommended changes to your schedule will be made at this time. If the audit reveals that you will not be able to graduate in the intended term (postponed), you will need to reapply for graduation in the term all graduation requirements are met.

Following the term a final audit will be completed. Those that have meet all requirements will have degrees posted on transcripts and diplomas ordered. Students that are in good financial standing will have diplomas mailed to them. Your diploma, along with a complimentary official copy of your final transcript, will be mailed to you at no charge about four weeks after the end of your term of graduation.

For more information or assistance, contact us at:

Office of the Registrar

University of Pittsburgh at Titusville
PO Box 287
Titusville, PA 16354

Phone: 814-827-4482

Fax: 814-827-5405



UNIVERSITY OF PITTSBURGH AT TITUSVILLE

APPLICATION FOR GRADUATION

PLEASE PRINT ALL ENTRIES. This form will be used in preparing your diploma. **Enter your legal name, as you would like it to appear on your diploma.**

Last Name	First Name	Middle Initial
Student ID Number	XXX – XX - _____ Last four digits of your SS Number	
Telephone Number	E-mail address	

Complete Address

Street

City

State

Zip

Anticipated Graduation Date:

April Year _____
 August Year _____
 December Year _____

Degree or Certificate Applied For:

- | | |
|--|--|
| <input type="checkbox"/> AA Liberal Arts | <input type="checkbox"/> AS Business |
| <input type="checkbox"/> AA Human Services | <input type="checkbox"/> AS Business Information Systems |
| <input type="checkbox"/> AS Accounting | <input type="checkbox"/> AS Natural Science |
| <input type="checkbox"/> AS Nursing | <input type="checkbox"/> AS Physical Therapist Assistant |

SIGNATURE REQUIRED

Signature of Student

Date

Completed forms should be submitted to the Office of the Registrar.

Mailing address:
 Office of the Registrar
 University of Pittsburgh at Titusville
 PO Box 287
 Titusville, PA 16354

Fax number: (814) 827-5405

Office Use Only:

Date Received _____

Date Processed _____