GRADUATION INSTRUCTIONS

If you have completed or will complete all the requirements for your degree you must apply for graduation.

An Application for Graduation (below) must be completed and submitted to the Office of Student Services.

An audit of your coursework will be done to verify that you have completed all the requirements for your degree. You will be notified of the results of the audit before the end of the Add/Drop period. If needed, recommended changes to your schedule will be made at this time.

Following the term a final audit will be completed. Those that have met 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 six weeks after the end of your term of graduation.

For more information or assistance, contact us at:

Office of Student Services
University of Pittsburgh at Titusville
504 East Main Street
Titusville, PA 16354

Phone: 814-827-4431

Fax: 814-827-4522
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.

____________________________     ____________     ____________________________
First Name   Middle Name or Initial   Last Name

___________________________________________     XXX – XX -
Student ID Number     Last four digits of your SS Number

___________________________________________    ____________________________________
Telephone Number                E-mail address

Complete Mailing Address:

_________________________________________________________________________________
Street

_________________________________________________________________________________
_________________________________________________________________________________

____________________________________________   _________________       _______________
City       State                  Zip

Anticipated Graduation Date:

☐ April     Year ______       ☐ August     Year ______       ☐ December     Year ______

Degree Applied For:

☐ AS Accounting                ☐ AS Business                   ☐ AS Business Information Systems
☐ AS Biology                ☐ AS Business Information Systems
☐ AS Business                ☐ AS Business Information Systems
☐ AS Business Information Systems

☐ AS Computer Technology
☐ AS Criminal Justice
☐ AS Human Services

☐ AS History
☐ AA Liberal Arts
☐ AS Natural Science
☐ AS Nursing
☐ AS Psychology
☐ AS Physical Therapist Assistant

SIGNATURE REQUIRED

_______________________________________________    ________________________________
Signature of Student    Date

Completed forms should be submitted to the Office of Student Services in Davis Hall.

Mailing address:
Office of Student Services
University of Pittsburgh at Titusville
504 East Main Street
Titusville, PA 16354

Fax number: (814) 827-4522

Office Use Only: