



Request to Walk, Summer Graduation Candidate

	Summer
Student ID Number	Year
_ _ Last Name	
_ _ _ First Name	_ _ Middle Name
I wish to walk in the May commen requirements:	ncement ceremony. I understand that I must meet the following
 I must turn in graduation check request by March 15. I must turn in graduation application and fee for summer by March 15. I must only have 6 hours remaining per the graduation check. I must be enrolled in those 6 hours in the summer term by April 7th. You will be contacted via your mix account and other available contact information in STAR. Be sure that your information is up-to-date.	
Graduation Candidate Signature:	Date
Signature	Date
For Office Use Only:	
 Graduation Check date received: Graduation Application and Fee date rece Number of Hours remaining: Enrolled for Summer: Yes No 	ived:
Student is Approved Denied.	
Student notification date:	