University of West Georgia

Graduate Petition for Degree

Print Form

SECTION 1 - PERSONAL INFORMATION

Full Legal Name (First / Middle / Last) 917 Number: Petition Type: New ◯ Reactivation ◯

Diploma Name (First / Middle / Last) UWG Email: Phone: _____

Diploma Address:

Marching Y ◯ / N ◯

College/School: 0 (Example: COE, RCOB, A&S, Nursing) Major: (Example: CEPS, ECE, MGT, BIOL, etc.) Graduation Term: (Example: Fall / Spring / Summer, Yr)

Degree

Thesis ◯ Non-Thesis ◯

Identify transfer courses by institution from which credit is earned

SECTION 2A - COMPLETED PORTION OF PROGRAM										SECTION 2B - CURRENT & PLANNED COURSES			
Subject	Number	Course Title	Grade	Hours	Subject	Number	Course Title	Grade	Hours	Subject	Number	Hours	Grade

If applicable have you fulfilled language requirement? Yes ◯ No ◯ Language/How Satisfied _____

SECTION 3 - SIGNATURES

SECTION 3A

Student: _____ Signature _____ Date

Department Chair: _____ Signature _____ Date

Dean/Associate Dean of College _____ Signature _____ Date

SECTION 3B

LIST Committee Members

Major Professor/ Advisor

SECTION 3C

SIGNATURES of Examining Committee

COMMITTEE REPORT ON COMPREHENSIVE EXAM

Passed ◯ Failed ◯ Initials _____