

Bachelor Degree Graduation Certification Form

This form, when signed, certifies that the below named student has completed all of the requirements for either the degree, additional major and/or minor stated below. A diploma will be ordered when the primary major as well as any additional major(s) and/or minor(s) are certified for the same certification date. Please sign and return the appropriate page of this form (i.e. Bachelor Degree Certification **only**) to the University Registrar's Office via email at registrar-forms@andrew.cmu.edu.

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last First and/or Preferred MI

Primary College: _____ Primary Department: _____

CERTIFICATION INFORMATION

Student's Diploma Name: _____

Primary Degree: _____
Examples: Bachelor of Science in Chemical Engineering, Bachelor of Fine Arts in Music Performance (Violin), Bachelor of Architecture

Certification Date (*check one*):* May August December Year _____
(example 2014)
**If degree was certified more than one year ago, a memo signed by the department head is required.*

Additional Major(s): _____
Applicable to undergraduates only.

Certification Date (*check one*): May August December Year _____
(example 2014)

Minor(s): _____
Applicable to undergraduates only.

Certification Date (*circle one*): May August December Year _____
(example 2014)

Reason for Late Certification (**REQUIRED**): _____

HONORS:

Check all that apply: University College _____
Associate Dean's Office signature required.

Honors Thesis Title (*if applicable*): _____

DELIVERY INFORMATION

Please Note: There is no pick-up option for August/December diplomas, and we do not mail diplomas to academic departments or SMC Boxes. Additionally, a Diploma Delivery Address must be available in S3; we will not mail to Permanent Addresses.

Mail diploma to student (**be sure address on S3: Degree Certification is correct**)? YES NO

If not correct, use this address instead: _____

Student personal (non-Andrew) email address: _____

Student phone number (required for international addresses): _____

REQUIRED SIGNATURES

Print Department Contact Name: _____

Phone: _____

Print Department Head Name: _____

Date: _____

Department Head Signature: _____

mm/dd/yyyy

Master Degree Graduation Certification Form

This form, when signed, certifies that the below named student has completed all of the requirements for the degree stated below. A diploma will be ordered when the degree is certified for the same certification date. Please sign and return the appropriate page of this form (i.e. Master Degree certification **only**) to the University Registrar's Office via email at registrar-forms@andrew.cmu.edu.

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last First and/or Preferred MI

Primary College: _____ Primary Department: _____

CERTIFICATION INFORMATION

Student's Diploma Name: _____

Degree: _____

Examples: Master of Science in Computer Science, Master of Arts in Professional Writing, Master of Human-Computer Interaction

Certification Date (*check one*):* May August December Year _____
(example 2014)

**If degree was certified more than a year ago, a memo signed by the department head is required.*

Masters Thesis Title (*if applicable*): _____

(*Tepper School of Business ONLY*) University Honors? YES NO

Reason for Late Certification (**REQUIRED**): _____

DELIVERY INFORMATION

Please note: There is no pick-up option for August/December diplomas, and we do not mail diplomas to academic departments or SMC boxes. Additionally, a Diploma Delivery Address must be available in S3; we will not mail to Permanent Addresses.

Mail diploma to student (**be sure address on S3: Degree Certification is correct**)? YES NO

If not correct, use this address instead: _____

Student personal (non-Andrew) email address: _____

Student phone number (required for international students): _____

REQUIRED SIGNATURES

Print Department Contact Name: _____

Phone: _____

Print Department Head Name: _____

Date: _____

Department Head Signature: _____

mm/dd/yyyy

Doctoral Degree Graduation Certification Form

This form, when signed, certifies that the below named student has completed all of the requirements for the degree stated below. A diploma will be ordered when the degree is certified for the same certification date. Please sign and return the appropriate page of this form (i.e. Doctoral Degree Certification **only**) to the University Registrar's Office via email at registrar-forms@andrew.cmu.edu.

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last First and/or Preferred MI

Primary College: _____ Primary Department: _____

CERTIFICATION INFORMATION

Student's Diploma Name: _____

Degree: _____

Example: Doctor of Philosophy in Public Policy and Management

Certification Date (check one)* May August December Year _____
**If degree was certified more than a year ago, a memo signed by the department head is required.* (example 2014)

Doctoral Advisor(s): _____

Ph.D. Thesis Title: _____

Reason for Late Certification (REQUIRED): _____

DELIVERY INFORMATION

Please Note: There is no pick-up option for August/December diplomas, and we do not mail diplomas to academic departments or SMC boxes. Additionally, a Diploma Delivery Address must be available in S3; we will not mail to Permanent Addresses.

Mail diploma to student (**be sure address on S3: Degree Certification is correct**)? YES NO

If not correct, use this address instead: _____

Student personal (non-Andrew) email address: _____

Student phone number (required for international students): _____

REQUIRED SIGNATURES

Print Department Contact Name: _____

Phone: _____

Print Department Head Name: _____

Date: _____

Department Head Signature: _____

mm/dd/yyyy