



GRADUATING STUDENT INFORMATION FORM



**Each graduating student should complete this form and return to
Melanie Bayles, Academic Program Coordinator prior to graduation**

STUDENT INFORMATION (We need a permanent mailing address and email. Do not enter the department mailing address.)	
Semester and Year You Will Receive Your Degree	Click here to enter text.
Gender	Choose an item.
First Name	Click here to enter text.
Middle Initial	Click here to enter text.
Last Name	Click here to enter text.
Mailing Address	Click here to enter text.
City	Click here to enter text.
State	Click here to enter text.
Postal Code	Click here to enter text.
Country	Click here to enter text.
Email	Click here to enter text.
THESIS AND DISSERTATION INFORMATION	
Degree	Choose an item.
Section/Division of Interest (Choose best match)	ASA Choose an item. CSSA Choose an item. SSA Choose an item.
Major Professor 1	Click here to enter text.
Major Professor 2 (optional)	Click here to enter text.
Major Professor 3 (optional)	Click here to enter text.
Degree Date	Click here to enter a date.
Major	Choose an item.
Minor (optional)	Click here to enter text.
Thesis/Dissertation Title	Click here to enter text.