

NOTE: IT IS IMPORTANT THAT YOU READ THE BACK OF THIS FORM BEFORE COMPLETING THIS SIDE.



UNDERGRADUATE DEGREE APPLICATION

TRINITY COLLEGE

BY WHICH MONTH AND YEAR WILL YOU HAVE COMPLETED YOUR DEGREE REQUIREMENTS

MAY 20 _____
(YEAR)

DECEMBER 20 _____
(YEAR)

NAME: NOTE: THE NAME THAT YOU INDICATE BELOW WILL BECOME THE PERMANENT NAME ON YOUR DIPLOMA

PRINT HERE:

PLEASE CLEARLY PRINT, INCLUDE ANY PUNCTUATION OR ACCENT MARKS.

NAME PRONUNCIATION:

PRINT HERE:

PRINT YOUR NAME EXACTLY AS IT IS PRONOUNCED (SEE REVERSE SIDE FOR INSTRUCTIONS):

STUDENT ID: _____

SEX MALE FEMALE

DEGREE TYPE:

BACHELOR OF: <input type="checkbox"/> ARTS <input type="checkbox"/> SCIENCE	MAJOR(S): _____
	MINOR(S): _____

CREDIT:

ARE TRANSFER CREDITS CURRENTLY PENDING FROM ANOTHER COLLEGE? <input type="checkbox"/> YES * <input type="checkbox"/> NO	IF YES, HOW MANY?	* PLEASE NOTE THAT ALL TRANSFER GRADES MUST BE RECEIVED BY THE END OF TRINITY'S TERM FOR YOU TO REMAIN A DEGREE CANDIDATE.
IS AP CREDIT PENDING? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, HOW MANY?	

ADDRESS:

HOME STATE or HOME COUNTRY (IF OTHER THAN U.S.) To be listed in the Commencement Program and next year's Bulletin	CAMPUS BOX	CELL PHONE NUMBER
EMAIL: _____		
IF NOT ON CAMPUS IN SPRING TERM, INDICATE ADDRESS TO WHICH COMMENCEMENT INFORMATION SHOULD BE SENT.		

I HAVE MET WITH MY ACADEMIC ADVISOR(S) TO REVIEW OUTSTANDING REQUIREMENTS IN MY MAJOR(S), AND WE HAVE DETERMINED THAT I AM ON SCHEDULE TO GRADUATE AT THE END OF THE TERM INDICATED ABOVE.

STUDENT SIGNATURE: _____	DATE OF APPLICATION
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ADVISOR SIGNATURE: _____