Office of the Registrar
1301 20th St So
Great Falls, MT 59405
[406] 791-5201 or [800] 856-9544
registrar@uprovidence.edu | uprovidence.edu

UNIVERSITY OF
PROVIDENCE

Graduation Application

1. All students wishing to graduate must complete an application for graduation and submit it to the Registrar's Office prior to the graduation application deadline.

Graduation Date		Due Date*	Audit returned by
May	Priority	April 15	August 15
	Deadline	October 15	1st Day Spring classes
	Late	After October 15	When completed
August	Priority	October 15	1st Day Spring classes
	Deadline	February 15	May 15
	Late	After February 15	When completed
December	Priority	February 15	May 15
	Deadline	April 15	August 15
	Late	After April 15	When completed

Graduation fees (undergraduate and graduate): **$90**

2. Students are expected to submit complete program planners along with graduation applications. Planners should include the semester a course was taken, as well as the grade received and, if it is a transfer course, should include the course name, number and transfer university.
   a. Students should have updated, official transcripts sent to verify any coursework taken concurrently with their UP enrollment. If updated transcripts are not on file, it will delay the processing of your application.

3. All graduation applications must include the signature of the student and the student's academic advisor.

4. Any **approved** course substitutions or petitions for special consideration should be included with the application. Partially approved forms should NOT be included and the Registrar's Office will NOT be responsible for obtaining signatures of approval.

5. Students are expected to submit payment along with their application. If an application is received without payment, the fee will be assessed to the student account and due immediately.

6. Upon receiving completed and signed applications, the Registrar's Office will complete an initial review of the graduate's status. An email will be sent to notify students if their requirements are in order for the requested graduation date. Emails are only sent to UP email addresses.

7. **Incomplete and partial applications will be returned to the applicant and will not be audited by the Registrar's Office.**

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Graduation Application

Please indicate degree level: O Undergraduate (Certificate, Associate, Bachelors)   O Graduate (Master's)

Proposed semester of completion of requirements for degree: (check one)

O August   O December   O May   **20**_____

Student's name: _____ Student ID # _____

My name as I would like it to appear on my diploma: (please **print** clearly)

_____ _____ _____
Last   First   Middle

Permanent address to which diploma should be mailed 10-12 weeks following semester completion:

_____

_____

Phone Number: _____   UP Email Address*: _____
*Your official degree audit to be emailed to you at your UP Email address. Audits will not be sent to personal emails.

Commencement Program Information:

May your name to be listed in the Commencement Program? (if yes, please provide hometown below)   O Yes   O No

Hometown: _____

City   State   Country

Degree Information:

Major _____

Major_____

Degree: O Associate   O Arts   or   O Science

O Bachelor   O Arts   or   O Science

Minor _____   O Master

Concentration _____

O   Dual Degree** – Check here if you are seeking a dual degree.
 **You must have at least 158 credits for a dual degree if graduating with a 2012 – spring 2017 catalog; 150 credits if graduating with a fall 2017 or newer catalog.
 **An additional $10.00 is required for a dual degree (Total of $100)

- **A COMPLETED PLANNING SHEET MUST ACCOMPANY THIS APPLICATION FOR EACH MAJOR, MINOR, AND/OR CONCENTRATION.**

- **PLEASE INCLUDE THE SEMESTER YOU PLAN TO TAKE ANY REMAINING COURSES REQUIRED FOR YOUR PROGRAM.**

- **APPLICATIONS RECEIVED WITHOUT PLANNING SHEETS WILL BE RETURNED.**

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Graduation Application

I have read the college catalog with regard to graduation requirements and understand my obligations. I am graduating under an eligible catalog and have attended every fall and spring semester since that catalog was published. I understand that I must fulfill all requirements under that catalog.

I am graduating under the _____(YR) - _____(YR) University of Providence Catalog. I have attached the same planners for this academic year (catalog).

Student Signature _____ **Date** _____

Advisor Approval
I am the advisor of record for this student and have reviewed the above named candidate's record and compared it against the aforementioned catalog. In doing so, I am signing this application approving the student's program as outlined providing all said coursework is completed within the guidelines established for graduation.

Advisor Signature _____ **Date** _____

Preliminary Audit BA/BS Only:

O Completion of 120/128 Credits   O Completion of 40%/15 cr. of major/minor at UP

O Cumulative GPA of 2.0 (UP only)   O 30 of last 40 credits completed at UP

O Completion of Core Curriculum   O 32 upper-division credits / 16 from UP

O Completion of Major   O 2nd Major, minor or concentration (prior to 2009)

Notes: _____
_____

Preliminary Audit Masters Only:

O Minimum 3.0 GPA   O No more than 2 C grades

O Requirements will be met with satisfactory completion of coursework as outlined.

O Requirements have been met.

O Requirements will not have been met. Student graduation date changed to:

Final Audit:

Semester degree was granted: O August _____   O December _____   O May _____

UP earned credits _____ Cumulative GPA: _____ Honors: O Cum   O Magna   O Summa   O W/Distinction
                                                         3.50-3.74   3.75-3.89   3.90-4.00   4.00

_____   _____
Registrar Signature   Date

          Degree recorded _____