

D		Student ID Number		Catalog Year	
Degree Audit		<u> </u>		_	
Name Enrolled Under (Last, First, Middle,	Other)	Maj	or or Minor*	☐Major —	
			. 11. 6	Minor	
	_	*You must submit separa	ite audits for eac	h major and minor	
All requirements will be complet	ed at the end of _	Spring Summer Fall		Year:	
		d all waivers of degree requirement Department Head, and the Dean of			
REQUESTED SUBSTITUTIONS:					
Course Prefix/Number	Course Prefix	k/Number			
1	for	Listed below are	all courses	not completed and	
2	for	required to con			
3	for	correspondence ar			
4	for				
5	for		only. If electives are required, list the total hours of		
6	for				
7	for	electives and whet			
8	for				
REQUESTED WAIVERS: Course	Prefix/Number	REQUIRED COURS	FS (Prefix/N	(umher)	
1		mayomaa doona.	LD (IICILA)I	uniber,	
2					
COLLEGE DISTINCTION					
1					
2					
Current EHRS					
Less duplicate credit, repea	to overes DE				
Hours toward graduation	ts, excess r L				
Plus hours on audit					
	roo on minon (O				
Min. of req'd hours for degr					
hour UD requirement satisfied		ELECTIVES(Lower Division)	 -	er of hours required er of hours required	
*This form can be signed electronica	ılly in Adobe.	ELECTIVES(Upper Division)	(Hullibe	er of flours required	
		ations and/or waivers listed above. The requirements for the above student at t			
	ompiete graduation i	equirements for the above student at t			
*Signature, Advisor:					
*Signature, Head of Department:			Date:		
*Signature, Dean of College:			Date:		
Signature, Student:			Date:		
Requirements verified by Registrar's Representative:					