



COLLEGE *and* GRADUATE SCHOOL
of ARTS & SCIENCES

DEGREE CERTIFICATION FORM

This form should be used only if your degree does not have a thesis requirement.

Student _____

Program _____

University ID# (9 digit # on back of ID) _____

Email _____

The student has completed all of the requirements for the degree (with the exception of final grades)

Student signature _____ Date Signed _____

Graduate Administrator _____ Date signed _____

Director of Graduate Studies _____ Date Signed _____