UNIVERSITY OF WISCONSIN
PLATTEVILLE
OFFICE OF THE REGISTRAR

INTENT TO GRADUATE FORM

- ENGINEERING STUDENTS – Please submit form to the Department of your major.
- DISTANCE LEARNING STUDENTS – Please submit form to the Distance Learning Center **with your $25 graduation fee**.
- ALL OTHER STUDENTS – Please submit form to the Registrar's Office.

Please print your name as you wish it to appear on your DIPLOMA

First Name: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ Middle: ___ Last Name: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

ID# or SS# (last 4 digits only): ___ ___ ___ ___ ___ ___ ___ ___ ___ DEGREE SOUGHT: ____BS ____BA

INTENDED GRADUATION DATE: _____ (Month/Year) INIDICATE CATALOG YOU ARE FOLLOWING: _____ (Year)

LOCAL ADDRESS:_____
Street City State Country Zipcode

SEND DIPLOMA TO:_____
Street City State Country Zipcode

COLLEGE (1ST major): ◯ LAE(Liberal Arts & Education) ◯ EMS(Engineering, Math & Science) ◯ BILSA(Bus.,Ind.,Life Sc., & Agri)

1ST MAJOR:_____(Emphases)_____

COLLEGE: (2ND major): ◯ LAE(Liberal Arts & Education) ◯ EMS(Engineering, Math & Science) ◯ BILSA(Bus.,Ind.,Life Sc., & Agri)

2nd MAJOR:_____(Emphases)_____

MINOR 1:_____ MINOR 2: _____

FOR OFFICE USE ONLY

Date Received	Evaluation Information

Honors	GPA	Date of Check/By	Ready for Posting	DNG
Summa Cum Laude **Magna Cum Laude**				