



Certificate Graduation Verification Form

Student Name		Student ID Number	
Graduation Term	Advisor		
Certificate Program			Bulletin Year

Please verify below that each requirement has been satisfied. This form must be signed/submitted to the Office of Admissions, Records and Registration by the appropriate authorities as designated by the dean of the college.

UNIVERSITY REQUIREMENTS:

2.00 Overall GPA (minimum) Yes No 2.00 A-State GPA (minimum) Yes No

CERTIFICATE REQUIREMENTS:

Course Number	Course Title	Term and Year	Final Grade
<i>Ex. MATH 1023</i>	<i>College Algebra</i>	<i>Fall 2018</i>	<i>B</i>

NOTES: Please describe any outstanding graduation issues for this student (e.g. GPA, hours, transfer work, etc.)

Signature of Advisor: _____ Date: _____

Signature of Chair: _____ Date: _____

Signature of Dean: _____ Date: _____

Please print/sign and deliver to the Office of Admissions, Records, and Registration **OR**
 Type name above and submit electronically (must come from astate.edu email) by clicking here 