



# OFFICE OF THE REGISTRAR

## 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 the Registrar 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 the Registrar **OR**  
 Type name above and submit electronically (must come from [astate.edu](mailto:astate.edu) email) by clicking here 