



Prospective graduates are required to officially check out for graduation. This form is designed for the units listed below to certify that the student named below has cleared all obligations with Southern University at Shreveport.

Instructions:

- 1). Complete information as requested below and return the form to the Registrar's Office. **All information must be typed.**
- 2). The name on your University records **MUST** be the same as your degree. This means that you must correct your records should your marital status change, or you wish to change your name for any reason, providing you submit the proper paperwork.
- 3). Submit proof of payment (receipt) of the graduation fee to the Registrar's Office by the specified deadline date.

Student's Name: _____ Banner ID# **U01**_____

Major: _____ Concentration: _____

Address: _____
 City ST Zip

Home Phone# _____ Cell Phone # _____ Cell Phone Provider: _____
(AT&T, Sprint, Verizon, etc.)

E-mail Address: _____@susla.edu Personal Email Address: _____

All signatures must be obtained prior to issuance of academic regalia to indicate clearance for graduation.

1. _____
Cashier

5. _____
Testing Center Coordinator

NOTE: The Testing Center Coordinator's signature is only required for students pursuing an Associate's Degree.

2. _____
Library Staff Member

6. _____
Research, Sponsored Programs & Institutional Effectiveness Staff Member

3. _____
University Police Staff Member

7. _____
Career Services Staff Member

4. _____
Financial Aid Staff Member

8. _____
Registrar's Office Staff Member

DISCLAIMER

I understand that this **CHECK OUT** form in no way indicates that I have met all the requirements for commencement. It only indicates that I have cleared all of the areas noted and that the Registrar's Office does have my permission to move forward with my graduation application and commencement packet.

If I do not meet all requirements by passing my courses and /or any other requirements, I will be notified and/or my degree or certificate will be placed on **HOLD** by the Registrar's Office.

____ I plan to participate in the commencement ceremony.

____ I **do not** plan to participate in the commencement ceremony.

Student's Signature: _____

Date: _____