



UNDERGRADUATE SENIOR CLEARANCE FORM

It is the potential graduate's responsibility to ensure that this form is completed and submitted to the registrar's office prior to receiving graduation materials (cap and gown, diploma, final transcript, etc.).

***All signatures should be obtained except the Acting President/Provost/Executive VP/ VP for Academic Affairs, Dr. Lisa Long.**

Student's Name _____ ID# _____

Email _____ Phone _____

Please sign below in the appropriate space, indicating that the above mentioned student is in good standing and has settled all outstanding responsibilities in your area.

Business Office (Sumner Hall, Room 122) _____ Date _____

Financial Aid (Seymour Hall, Room 11) _____ Date _____

Registrar's Office (Seymour Hall, Room 9) _____ Date _____

Acting President/Provost/Executive VP/ VP for Academic Affairs (Dr. Lisa Long) _____ Date _____