

**East Carolina University**  
**Undergraduate**  
**Application for Graduation**

**Please print all information**

\_\_\_\_\_, 20\_\_\_\_ Current Phone including area code \_\_\_\_\_ B \_\_\_\_\_  
Today's Date ECU ID Number

*Name on diploma will be as appears on this application*

**Print Name in Full** \_\_\_\_\_  
First Middle Maiden (Optional) Last

**Permanent Address\*** \_\_\_\_\_  
No. Street  
\_\_\_\_\_  
City State Zip Code County

*(\*This address will be used when mailing your diploma)*

**Degree Information**

**Degree** \_\_\_\_\_

**Major** \_\_\_\_\_

**Minor** \_\_\_\_\_  
(IF APPLICABLE)

**Conc** \_\_\_\_\_  
(IF APPLICABLE)

Check expected date and year the requirements will be completed:  FALL, 20\_\_\_\_  SPRING, 20\_\_\_\_  SUMMER, 20\_\_\_\_

This application for graduation must be filed in the Office of the Registrar, 108 Whichard Building, no later than two semesters prior to the completion of all requirements.