INTENT TO GRADUATE – JUNIOR RECORDS CHECK

INTENT TO GRADUATE CHECKLIST:

☐ COMPLETE THIS FORM WHEN YOU HAVE EARNED 80-90 CREDITS OR ARE IN YOUR SIXTH SEMESTER
☐ HAS YOUR THREE COURSE SEQUENCE FORM BEEN SUBMITTED?
☐ HAS ANY MAJOR-SPECIFIC INDIVIDUALIZED INFO BEEN SUBMITTED? (e.g. PRT professional electives, ENVS major plan, FOR concentration)
☐ HAVE ALL NECESSARY SUBSTITUTION/WAIVER REQUESTS BEEN SUBMITTED?

SUBSTITUTIONS, WAVERS or INDIVIDUALIZED MAJOR INFO NOT SHOWING ON THE CATS REPORT MUST BE SUBMITTED WITH THIS FORM. PLEASE ATTACH A COMPLETED CATS EXCEPTION FORM OR OTHER APPROPRIATE FORM (e.g. 3 Course Sequence Form, program specific form, Core/Gen Ed Substitution Request Form).

☐ MEET WITH YOUR ADVISOR FOR REVIEW AND SIGNATURE

RETURN FORM TO THE DEAN’S OFFICE, 220 AIKEN (Questions? Emilie Riddle, eriddle@uvm.edu)

NAME: ______________________________________ ID: _________________________
ADVISOR: ______________________________________
UVM EMAIL: ______________________________ Non-UVM EMAIL: ____________________________________
MAJOR: ______________________ OPTION/CONCENTRATION: ___________________ MINOR: _________________
(Double majors should complete a form for each major)
CATALOG EDITION (year): _________ NUMBER OF CREDITS REQUIRED: _______

AS OF _________ THIS STUDENT HAS COMPLETED:

______ TOTAL CREDITS EARNED (do NOT include in-progress courses)
______ CUMULATIVE GRADE POINT AVERAGE

REQUIRED COURSES WHICH MUST BE PASSED – INCLUDE IN-PROGRESS COURSES:

(LIST COURSE NUMBER, ADD TITLE IF SPECIAL TOPICS NUMBER)

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ADDITIONAL ELECTIVE CREDITS REQUIRED TO REACH TOTAL FOR GRADUATION: _______ credits

Stars: PLEASE SEE REVERSE -- ADDITIONAL REQUIRED INFORMATION Stars
ANTICIPATED DATE OF GRADUATION:

MAY (year) __________   SEPTEMBER (year)* __________   JANUARY (year)* __________

YOUR NAME AS YOU WOULD LIKE IT TO APPEAR ON YOUR DIPLOMA (PLEASE PRINT):

__________________________________________________________________________________________

YOUR HOMETOWN (City, State) AS YOU WOULD LIKE IT TO APPEAR IN COMMENCEMENT PROGRAM (PLEASE PRINT):

__________________________________________________________________________________________

We certify that successful completion of the courses above will fulfill all requirements for graduation.

_______________________________________________         ____________

Student’s Signature                   Date

_______________________________________________         ____________

Advisor’s Signature                   Date

*Students completing their requirements during the summer are considered a September graduate; those finishing in December are considered a January graduate. Degrees are mailed in September and January; May graduates receive their diploma at Commencement or in the mail if they do not attend the ceremony.