

STATEMENT OF FORTHCOMING DEGREE

\$3.00 charge per certification for regular processing / \$15.00 charge for same day processing

Statements of Forthcoming Degree will *not* be provided for students with financial and other obligations to the University

Part I

Student Name: _____

Student Signature: _____

E-mail Address: _____

Phone Number _____

Current Address: _____
(if not listed below)

Billing Address: _____

Number of Statements Requested: _____

Please send to the address(es) below:

Address #1

Name

Address

Address #2

Name

Address

Part II

This section to be completed by student's academic school

KUID/EMPLID _____

This is to certify that _____ has completed all requirements for the _____, with a major in _____.

Date all academic work completed _____

Date degree will be awarded _____

Dean/Director

Date

After completion of both part one and two, submit this form to:

University Registrar-University of Kansas
1450 Jayhawk Blvd, Room 151 Strong Hall
Lawrence, KS 66045-7535

Telephone: 785-864-4422, 785-864-5454
Fax: 785-864-5230