

Confirmation of Degree Requirements

Date: _____ BSU Student ID# _____

Student Name: _____

Student BSU Email: _____

Program: _____

Advisor: (print) _____

I attest that the student listed above has completed all requirements for the degree. Y N

Required Signatures:

Advisor: _____ Date: _____

Dept. Chair or
Program Coord: _____ Date: _____

Graduate Director: _____ Date: _____

Graduate Office Only

Transcript/s Confirmation Y N

Approval Y N

Notes: