

Graduate School

## REQUEST FOR A LETTER OF COMPLETION

INSTRUCTIONS: Complete the first part of this form and turn it into your program.

This request must be approved by the student's Graduate Program to confirm all degree requirements have been met. Once the letter is completed, the Graduate School will send a copy to the student's email.

NOTE: You must have completed an Online Diploma Card, applied for graduation through your department, and have completed <u>all</u> degree requirements.

(To be completed by the stu-	dent)	
First Name:	Last Name:	Student ID Number:
Email:	Phone number:	College:
Program:		
(To be completed by program	m)	
As of(date posted to their transcript.	e), all graduation requirements for thi	s student have been met and all final grades have been
Please list the full degree the	e student has earned as it will appear	on their diploma:
REQUIRED SIGNATUR	ES FOR APPROVAL:	
Graduate Program (Departm	nent):	
Program Staff please note tl	nat the completed form <u>MUST</u> be sen	t to the Graduate School Office at graddocs@uccs.edu

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before the completion letter will be started.