

Date of Application: \_\_\_\_\_

gree.
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Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
*(Print name as you wish it to appear on diploma)*

Degree: **BACHELOR OF SCIENCE** Major: **FAMILY AND CONSUMER SCIENCES**

Concentration:  Child Development  Fashion Merchandising  Nutrition and Dietetics

Minor: \_\_\_\_\_ Do you expect to be certified to teach?  Yes  No

List all other institutions you have attended: \_\_\_\_\_

Date of catalog issue listing degree requirements: \_\_\_\_\_

Month and year you expect to complete degree requirements: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Permanent/Parent Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Your campus box number: \_\_\_\_\_ OR Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Do you plan to march in commencement exercises?  Yes  No

Cap and Gown Measurements (All info REQUIRED if marching – use inches for #3 & #4 measurements)

1) Height: \_\_\_\_\_ ft \_\_\_\_\_ in    2) Weight: \_\_\_\_\_ lbs.    3) Jacket/Chest Size: \_\_\_\_\_

4) Cap: \_\_\_\_\_    5) Race: \_\_\_\_\_    6) Gender:  Male  Female

Your hometown information (hometown to be listed on the commencement program):

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_