

Baccalaureate Student Application to Graduate with an Associate Degree

Student Information					
Name: First		Middle		Last	
Please print name exactly as y	ou would like it to appea			Last	
Morrisville ID# (or SSN)			Date of Birth _		/MM/YYYY
Current Degree Information					
Current School:					
Current Major:					
Degree (BT, B					Code
Anticipated Graduation Date:	MM/YYYY				
Associate Degree Application R	equest				
Requested Associate Degree:					
	Degree (AA, AS, AAS)	Title			Code
Anticipated Graduation Date:					
	MM/YYYY				
Required Signatures					
Nequired Signatures					
Applicant Signature:				Date:	
Dean Approval:				Date:	
Baccalaureate Major				Dutc	
Dean Approval:				Date:	
Associate Major					
Registrar Approval:				_ Date:	