Instructions: This form is to be used only AFTER applying for graduation. Filling out this form does NOT guarantee your request will be approved. All students are only candidates for graduation until grades are submitted and confirmed. Please sign the appropriate section of the form after completing the following information, and return it to:

Family, Home and Social Sciences Advisement Center
151 SWKT
Provo, UT 84602-5538
(801) 422-3541
FAX (801) 422-0226

Name_________________________________________Student ID Number_________________________________________
(as it appears on the graduation application)

Major __________________________________________Original Grad Date: Apr _____ (yr) Aug _____ (yr) Dec _____ (yr)

Email Address ___________________________________________________________ Phone __________________________

Mailing Address________________________________ City,ST,Zip__________________________

Permanent Address________________________________ City,ST,Zip__________________________

1) Change of Date:

CHANGE GRADUATION DATE TO: ☐APRIL _____ (Year) ☐AUG _____ (Year) ☐DEC _____ (Year)

REMAINING REQUIREMENT/ REASON FOR CHANGE:
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Student Signature: ___________________________ Date: __________

2) Change of Information:

☐ Add MINOR Minor Name________________________________________________________(Clearance form attached)

☐ Add 2nd MAJOR 2nd Major Name____________________________________________________(Clearance form attached)

☐ Drop MINOR Minor Name________________________________________________________

☐ Drop 2nd MAJOR 2nd Major Name____________________________________________________

Explanation of other changes: (NAME CHANGES must be reported to the Graduation Evaluation office, B-150 ASB, 422-6210; ADDRESS CHANGES must also be changed on AIM, or with the Registration Office, B-130 ASB, (801) 422-2631.)

☐ Address Change (see above):

(Street) (City, ST) (Zip)

☐ Change from OLD GE requirements to NEW University Core requirements

☐ Major/Emphasis Change -- From: _______________________________ To: _______________________________

Student Signature: ___________________________ Date: __________

For Office Use:

Move / Update: Card, Access & Adv01 ☐

Stamped Date Received

Saved as: S:/Office Forms/Graduation/grad-app-addendum