



Office of the Registrar, 410 Neville Street Beckley, WV 25801

2011-2012 Request to Change Graduation Date

Name _____

SS# _____ ID# _____

Original Graduation Date:

_____ (The conferral term you originally applied for)

New Graduation Date:

Monthly: _____ (the month in which you anticipate completion of the class)

You will be required to pay the **\$100.00** graduation fee again ***EACH*** time your graduate date is changed.

Method of Payment:

_____ Check or money order attached

_____ Credit Card

_____ \$ _____
Card Number Exp. Date Amount

Student Signature _____ Date _____

For Office Use Only

Student Accounts _____ File Change _____ Jenzabar Updated _____