

**NORTHEASTERN OKLAHOMA
A&M COLLEGE
Application for Degree**

PERSONAL DATA

Print last name, first name, middle initial	CWID	Current Phone No.
Current Mailing Address (Street/P.O. Box)	City, State, Zip	Email address

DIPLOMA/CERTIFICATE INFORMATION

Name to appear on diploma/certificate (Print first name first)

Mailing address	City, State, Zip
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**Do not use NEO P.O. Box for Diploma/Certificate Address*

DEGREE APPLICATION

Major	Advisor
Check type of degree applying for: <input type="checkbox"/> Associate of Arts <input type="checkbox"/> Associate of Science <input type="checkbox"/> Associate of Applied Science <input type="checkbox"/> One Year Certificate <input type="checkbox"/> Two Year Certificate	
Check anticipated completion date: <input type="checkbox"/> May <input type="checkbox"/> July <input type="checkbox"/> December	Year
Check your plans after graduation: <input type="checkbox"/> Transfer <input type="checkbox"/> Work <input type="checkbox"/> Other	If transfer, list college: If other, explain:

APPLICANT SIGNATURE

DATE

APPROVAL

We have checked this student's records and find the student to be a valid candidate for the degree requested.

Checked under 20 - 20 Catalog.

Advisor Signature	Date Approved
Department Chair Signature	Date Approved

OFFICE USE ONLY

Date application received:	Date of initial review:	Date of final review:	Date diploma mailed:
Degree Requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, list reason(s) not met.	
Course substitution received? <input type="checkbox"/> Yes <input type="checkbox"/> No		Honors: <input type="checkbox"/> President's Honor Roll <input type="checkbox"/> Deans Honor Roll <input type="checkbox"/> PTK	
Degree(s) Awarded:		Date degree(s) awarded:	