



Absentia Graduation Application/Petition

Student ID# _____ E-Mail (REQUIRED) _____

(Or Social Security Number)

Date of Birth (MM/DD/YY) _____ Phone(REQUIRED) _____

Name _____

Last First Middle Initial Former Last Name

Address _____

Box/Apt.No./RD/Street City State Zip Code

Degree/Certificate & Major (EX: AAS – Gen Studies) Last Semester & Year Enrolled

Name and Location of college attended to finish Degree

Have you ever been dismissed/suspended from a college for disciplinary reasons?

- Yes
- No

GRADUATION REQUIREMENTS:

SUNY Delhi Course(s) required to Graduate

Equivalent Course(s) completed at external college

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

STUDENT CHECKLIST:

- Please sign and return this form to the Registrar’s Office, SUNY Delhi, 124 Bush Hall, 454 Delhi Drive Delhi, NY 13753.
- Submit an official transcript of the course work to the Registrar’s Office, SUNY Delhi, 124 Bush Hall, 454 Delhi Drive Delhi, NY 13753

STUDENT SIGNATURE

DATE

For Internal Use Only

ACADEMIC ADVISOR SIGNATURE or DIVISION DEAN/DEPT CHAIR

DATE

Date Received in the Registrar’s Office _____ Processed By _____

Pre-clear Not Pre-clear Reasoning _____