



Wayland Baptist University
Anchorage Campus
 7801 E. 32nd Ave.,
 Anchorage AK 99504
 907-333-2277 FAX: 907-337-8122

Application for Graduation BSOE/BAS/BCM

I hereby make application for the BSOE BCM BAS Degree from Wayland Baptist University.
 I will complete all required courses by (month) _____ (year) _____ at the _____ Campus.
 I am providing the following information to process my application: **(Please print clearly)**

I want my name PRINTED ON MY DIPLOMA as _____ My hometown for the graduation program is _____ Social Security Number / Power Campus Number _____ Current Mailing Address _____ Current Phone Numbers _____ E-mail Address _____ Permanent Address _____ For Graduation Gown Sizing > _____ Optional Instructions to Campus for Diploma _____	_____ _____ SS# _____ PC# _____ _____ Street , Number, or PO Box _____ _____ City State Zip Code _____ _____ (Home) (Work) _____ _____ E-mail Address _____ _____ Permanent Address _____ Street , Number, or PO Box _____ _____ City State Zip Code _____ Height: Feet: _____ Inches: _____ Weight: _____ Male <input type="checkbox"/> Female <input type="checkbox"/> <input type="checkbox"/> Hold Diploma at Campus Mail to: <input type="checkbox"/> Permanent Address <input type="checkbox"/> Current address
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I want to acknowledge with a WBU Certificate of Appreciation an individual who has contributed towards my attaining a WBU degree.

The person's name is: _____

Please check the appropriate boxes:

I am Applying for the _____ Campus graduation date in _____ (Month) _____.

I am Re-applying for the _____ Campus graduation date in _____ (Month) _____.

I have enclosed my payment for the application fee in the amount of \$75 \$105 \$50 (See Payment Schedule Below)

I will I will not be attending the graduation ceremony scheduled for _____ in _____ (Month) _____ (Campus) _____.

My signature below verifies that I understand if for some reason I fail to complete all requirements for graduation for the period selected above, I will have to submit a RE-APPLICATION for graduation and pay a re-application fee of \$50.00 for each diploma requested. I further understand that I am responsible to ensure that all non-Wayland credits must be received in the BAS/BSOE/BCM Records Office, Plainview, Texas, no later than six (6) weeks prior to the scheduled graduation date.

Signature of Student _____ Date _____

FOR OFFICIAL USE ONLY

Graduation Fee Paid \$75 <input type="checkbox"/> \$105 <input type="checkbox"/> \$50 <input type="checkbox"/> (date) _____ All Obligations arranged (date) _____ Diploma Granted (date) _____	Business Office _____ Business Office _____ Registrar _____ Major _____
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Graduation Application Fees	1. First Diploma - \$75	2. Both Diplomas (AAS and BSOE/BAS) \$105
	3. Re-application Fee - \$50 Each Diploma	4. 2 nd Diploma after receiving a WBU BSOE/BAS - \$50