



Student Evaluation Statement

(Requirements for Degree)

Name:
Student ID#:
Degree:
Major:
Concentration/Option/Emphasis/Area:
Minor/Cognates:
Catalog Year:
Transfer: <i>(list names of all colleges previously attended)</i>
1.
2.
3.
4.
If a degree was earned at another institution, please list:

Hours Required for Degree	
Hours Earned to Date*	
Hours Remaining for Graduation	

Other Requirements:	
Placement Office Interview	
Apply For Degree	

Cumulative Average		List Deficiency
Major Average		List Deficiency

**Current Courses Not Counted as Earned.*

Evaluator Signature

Date

By signing below, I acknowledge that I have reviewed the above 90-hour evaluation and understand its contents.

Student Signature

Date