REQUEST FOR PERMISSION TO WALK

MAY 20-- COMMENCEMENT CEREMONY

Official Graduation Date: August 20___

Student Name: _____

Student ID: _____

Major: _____

Division [check one]: Day_____ Evening_____ Graduate_____

Academic Advisor: _____

List the courses below which must be taken after Spring 20__ in order to complete graduation requirements by August 20__:

*1. _____

*2. _____

**** As per the University's residency requirement, all courses listed above must be completed at Philadelphia University.***

Student must register for the courses listed above as soon as summer registration begins. Permission may be revoked for those who do not register before May 1, 20__.

_____ _____

Signature of Student *Date*

THIS FORM SHOULD BE SUBMITTED TO THE CERTIFYING OFFICER or PROGRAM DIRECTOR BY OCTOBER 15, 20—(Year preceeding graduation)
Note this form requires the academic advisor's signature.

_____ _____

Signature of Certifying Officer for Undergraduate Students' *Date*
Signature of Program Director for Graduate Students'