



Registrar's Office

Willamette University  
900 State Street  
Waller Hall 1<sup>st</sup> Floor  
Salem, OR 97301  
[registrar@willamette.edu](mailto:registrar@willamette.edu)

## Salem Undergraduate Degree Completion Plan

Required for participation in the May 19, 2024 Salem Undergraduate Commencement Ceremony

Name: _____ Student ID Number: _____
Email Address: _____
Upon successful completion of outstanding requirements, I wish to have my degree conferred on: <input type="checkbox"/> August 31, 2024 (Official transcripts for transfer credit due in Registrar's Office by August 16, 2024) <input type="checkbox"/> January 15, 2025 (Official transcripts for transfer credit due in Registrar's Office by January 3, 2025) <input type="checkbox"/> May 18, 2025 (Official transcripts for transfer credit due in Registrar's Office by May 10, 2025)

Please review your current degree audit and list each remaining incomplete requirement below.

### Outstanding Requirement 1:

Name of requirement: _____
I will complete this requirement with: <input type="checkbox"/> Willamette University Course Number: _____ <input type="checkbox"/> Transfer Credit (attached is a completed Transfer Credit Request form) <input type="checkbox"/> Transfer Credit (I will submit a Transfer Credit Request form at a later date)

### Outstanding Requirement 2:

Name of requirement: _____
I will complete this requirement with: <input type="checkbox"/> Willamette University Course Number: _____ <input type="checkbox"/> Transfer Credit (please attach a completed Transfer Credit Request form) <input type="checkbox"/> Transfer Credit (I will submit a Transfer Credit Request form at a later date)

\*Attach additional pages if necessary.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Registrar's Office Use Only:

Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied
By: _____ Date: _____
Copy of completed form emailed to student: <input type="checkbox"/> Date: _____