

# ▷ INTENT TO GRADUATE ◁ FORM

BETHANY DIVINITY COLLEGE AND SEMINARY  
2573 Hodgesville Road, Dothan, Alabama 36301 U. S. A.  
Telephone (334) 793-3189 Fax (334) 793-4344

CHECK ONE. . . (1) BOX THAT APPLIES TO YOU:

➔ I **“WILL” ATTEND MAY Graduation on campus. I will pay the Graduation Fee of \$ 175.00 upon arrival**

➔ I **“WILL NOT” ATTEND MAY Graduation on campus, but will graduate “*In Absentia*”. I am enclosing the Graduation Fee of \$ 175.00 with this form. The degree packet will be mailed the 2<sup>nd</sup> or 3<sup>rd</sup> week in June.**

There are 2 deadlines the student must meet to receive their degree packet. . .  
This “Intent to Graduate” form must be in the Bethany office **no later than:**

**1) APRIL 1<sup>st</sup> before May graduation.**

**2) ALL work must be in our office by May 1.**

Bethany has one (1) on-campus graduation exercise annually. It is held the last Thursday in May. Orientation is the previous Wednesday night.

**Degrees are printed ONE TIME ANNUALLY. . .the last week in May. If you miss the deadline for ALL WORK COMPLETED on May 1st, your degree packet will be printed and mailed the following year.**

Students who find they are unable to attend the May graduation may receive their diplomas by mail and graduate *In Absentia* by checking the appropriate box above.

**( “ALL” STUDENTS “MUST COMPLETE” FRONT AND BACK PAGES )**

# INTENT TO GRADUATE FORM



**Effective April 1, 2012, The Graduation Fee Of \$ 175.00  
Must Be Paid At The Time Of Graduation.  
Please Fill Out The Cap-Gown-Hood Information Below If  
You Plan To Attend Graduation. The Form Must  
Be In The Office NO Later Than April 1<sup>st</sup> .**

CAP SIZE \_\_\_\_\_ or \_\_\_\_\_ ( INCHES AROUND HEAD)

HEIGHT \_\_\_\_\_ FT \_\_\_\_\_ INCHES      CHEST SIZE \_\_\_\_\_ INCHES

**THE SECTION BELOW MUST BE COMPLETED BY "ALL" GRADUATES**

**NAME (FIRST, MIDDLE, AND LAST, AS YOU WANT IT TO APPEAR ON "ALL" DOCUMENTS)**

\_\_\_\_\_  
**(IF PRINTED DEGREE IS INCORRECT AND DIFFERENT FROM ABOVE, WE WILL CORRECT!  
HOWEVER, IF STUDENT ERROR, THERE WILL BE A \$50.00 REPRINT FEE.  
REPRINTED DEGREES TO BE MAILED WITHIN 90 DAYS)**

## PHYSICAL ADDRESS

\_\_\_\_\_  
**CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_**

**E-MAIL ADDRESS:** \_\_\_\_\_

**DEGREE TO BE ISSUED:** \_\_\_\_\_

IF YOU ARE RECEIVING A "BACK-DATED" DEGREE PER DR. CARL WARDEN, DEAN, LIST IT BELOW:

\_\_\_\_\_  
**SPOUSES NAME:** \_\_\_\_\_

**DAYTIME TELEPHONE NUMBER(S)      MONDAY THROUGH FRIDAY 8 AM - 4 PM**

( \_\_\_\_\_ ) \_\_\_\_\_ **OR** ( \_\_\_\_\_ ) \_\_\_\_\_

\_\_\_\_\_  
**FOR COLLEGE USE ONLY**