

**Office of the Registrar
Cedar Crest College
Late Graduation Application Appeal Form**

Name:

Student ID #:

Date:

Email Address:

Phone Number:

Major(s):

Minor(s):

Concentration(s):

Undergraduate

Graduate

This form is to appeal for a late application for graduation. To appeal, this form – completed in full and with supporting documentation (If needed) must be submitted to the Registrar’s Office as soon as possible. **Submission of this form does not guarantee approval.** This form will also not be accepted after a degree conferral date.

Students may appeal for a late graduation application when a situation beyond their control prevents them from submitting the application before the deadline. Extenuating circumstances which **may** warrant approval of a late application submission include:

- Medical Illness or emergency that prevented the student from submitting the application.
- Family Emergency that occurred before the deadline that prevented the student from submitting the application.
- Changes in academic plan or graduation date.
- Other unexpected changes in circumstances that occurred prevented the student from submitting the application.

Circumstances that **do not** warrant an approval for a late graduation application submission include:

- Failure to act or submit the application before the deadline.
- Failure to submit the application due to technical difficulties or errors.
- Failure to communicate with advisors or faculty regarding student academic progress.

Please complete the section below in full and attach supporting documentation/explanation relating to your circumstances. Failure to provide this documentation may result in the denial of your appeal. Please submit all documents to the Registrar’s Office at registrar@cedarcrest.edu or you may hand it to us in person.

For what graduation date are you applying for? _____

For which reason were you unable to submit your application?

- Medical emergency or illness.
- Family emergency or occurrence outside of Cedar Crest College
- Changes in academic plan or graduation date.
- Other: _____

Do you have supporting documentation directly related to your circumstances? Yes No

On what date(s) did these circumstances occur that prevented you from submitting your application? _____

By signing below, I affirm that the information and documentation that I have provided on this appeal is true and correct. I also understand that any information discovered to be false or misleading will be subject to appeal denial and potential disciplinary action.

Student Signature:

Date:

Advisor Signature

Date: