DEGREE CHECK REQUEST

Degree Checks are provided for students who are within 4 quarters of graduation. A final degree check is completed when a student files for candidacy.

Full Name: ________________________________ Student ID #: __________________

Last First MI

Telephone: ________________________________ E-Mail: ___________________@ucdavis.edu

Major(s) (If double major, please mark both majors)

_____ Aerospace Science & Engineering
_____ Biochemical Engineering
_____ Biological Systems Engineering
_____ Biomedical Engineering
_____ Chemical Engineering
_____ Chemical/Materials Science & Engineering
_____ Civil Engineering
_____ Civil/Materials Science & Engineering
_____ Computer Engineering
_____ Computer Science & Engineering
_____ Electrical Engineering
_____ Electronic Materials Engineering
_____ Materials Science & Engineering
_____ Mechanical Engineering
_____ Mechanical/Materials Science & Engineering
_____ Optical Science & Engineering

I plan to graduate under the following curriculum for my major

_____ 2013–14
_____ 2012–13 _____ Not sure

Planned Quarter of Graduation
Quarter __________ Year __________

Upper Division Composition Requirement

_____ I passed the exam in ____________ (quarter/year).
_____ I will take the exam in ____________ (quarter/year)
_____ I took/will take an upper division UWP class.

Minor
Are you planning a minor(s): Yes No (Circle 1)
If yes, answer questions below:
a) I am planning to minor in: ___________________
b) You are allowed to overlap 1 course between your major and minor. The course I plan to use as overlap is: ____________________.

Note
If you plan to minor, please submit and approved petition as soon as possible.
The form can be found at: http://bit.ly/TaVLAa

You will be contacted by e-mail for an appointment when your degree check is ready. Your degree check will take approximately 5–7 days to complete.

Please Note: The University holds you responsible to ensure that all of your degree requirements are complete. If you feel there is an error in your academic record, please notify the Dean’s Office as soon as possible.

Signature ________________________________ Date ________________

PLEASE RETURN FORM TO ENGINEERING DEAN’S OFFICE, 1050 KEMPER HALL

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College of Engineering
Appointment Date ___________________________ Adviser __________________

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