CHANGE OF GRADUATION INFORMATION
To be completed by degree candidates who have already submitted a degree application, but now need to change information.

NAME: ____________________________________________________________________________

PLEASE PRINT FIRST MIDDLE OR MAIDEN LAST

STUDENT ID NUMBER: __________________________ PHONE NUMBER: __________________________

MAJOR: __________________________ MINOR: __________________________
(IF APPLICABLE)

COLLEGE: ____________________________________________________________________________

CAMPUS: CIRCLE ONE
GULF PARK HATTIESBURG ONLINE

PLEASE CHECK THE BOX OF ALL THAT APPLY:

☐ CHANGE DIPLOMA MAILING ADDRESS TO:

ADDRESS: 

CITY: STATE: ZIP:

☐ DROP MY MINOR IN: (NAME OF MINOR) __________________________

☐ DROP MY 2ND MAJOR IN: (NAME OF 2ND MAJOR) __________________________

☐ ADD A MINOR IN: (NAME OF MINOR) __________________________

SIGNATURE OF DIRECTOR OF MINOR PROGRAM REQUIRED BELOW

IMPORTANT NOTE: STUDENTS WANTING TO CHANGE THEIR DEGREE/DIPLOMA NAME MUST COMPLETE THE OFFICIAL NAME CHANGE FORM FOUND ON THE REGISTRAR’S WEB PAGE: WWW.USM.EDU/REGISTRAR/FORMS.

STUDENT SIGNATURE DATE

DIRECTOR OF MINOR SIGNATURE (IF NEW MINOR ADDED) DATE

DEGREE PROGRESS SPECIALIST (DPS) SIGNATURE DATE

PLEASE RETURN YOUR FORM BY ANY METHOD BELOW:

HAND DELIVER: 

GULF COAST STUDENTS: STUDENT SERVICES ONE STOP 1ST FLOOR HARDY HALL

HATTIESBURG STUDENTS: KENNARD WASHINGTON HALL 110

Email: REGISTRAR@USM.EDU

Fax: (601) 266-5816

REVISED 11/2018