



ARKANSAS STATE UNIVERSITY - NEWPORT

NEWPORT • JONESBORO • MARKED TREE

7648 Victory Blvd, Newport, AR 72112

(t): 870-512-7725 * (f): 870-512-7825

INTENT TO GRADUATE

*** Only typed forms will be accepted via Dynamic forms in the ASUN Portal. Hand-written forms will be returned. ***

For questions about your Intent to Graduate, contact Charlene Stapleton, 7648 Victory Blvd., Newport, AR 72112

(t): 870-512-7725 (e): charlene_stapleton@asun.edu

Fall Deadline: October 1st

Spring/Summer Deadline: March 1st

8-Week Program Deadline: First week

Anticipated Completion Date: _____ If your anticipated completion date changes, you must submit a new Intent.

ASUN Student ID#: _____

Name (as you want it to appear on your diploma): _____

Telephone: _____

Address (to which you want your diploma mailed):

**WATCH YOUR STUDENT EMAIL FOR IMPORTANT INFORMATION:
REQUIRED REGALIA; REHEARSALS; AND CEREMONY INFORMATION.**

Advisor: _____

Major: _____

At which campus will you complete your program? _____ **Newport** _____ **Marked Tree** _____ **Jonesboro**

Will you **participate** in a **commencement ceremony**? _____ **YES** _____ **NO**

In which commencement ceremony will you participate? _____ **NEWPORT** _____ **MARKED TREE & JONESBORO**

What type of award will you complete?

_____ **Associate Level*** _____ **Technical Certificate** _____ **Certificate of Proficiency**

*AA/AS will also receive Certificate of General Studies

Digital Student Signature (type your name above)

Date

Office Use Only: Date Received _____

| | | | |
|-------------|--------------|-------------------------------------|-----|
| Sex | Ethnic Code | Initial Attendance Status _____ | GPA |
| | | Initial Enrollment Status _____ | |
| Matric Date | Major in REG | Date Conferred ____/____/____ | |
| | | Date Diploma Printed ____/____/____ | |