

PETITION FOR DEGREE CERTIFICATE

# Student's Name Student's ID No. Student's Signature Date Address Program Estimated Graduation Date

The student has successfully completed all or is currently enrolled in the last of the courses required for his/her pro­ gram. , .

Dir.Adm.Reg, Sign Off: Date:

The student has no outstanding books due to Covenant University library. .

Librarian Sign Off: Date:

The student has completed all financial obligations to the university or has signed an acceptable repayment agreement for any outstanding balances. .

Dir.Business Affairs Sign Off: Date:

I, (name & position), have reviewed all of the student's records and find that he/she met all obligations to the university. This student is eligible for graduation. ,

. .

Academic Dean's or

Director's Sign Off: Date:

# Comments

Revise:d 06/2018