School of Public Affairs
DEPARTMENTAL GRADUATION APPLICATION
This application is to be completed by the student and submitted no later than Census Date of the semester in which the student expects to graduate.

Name (as shown on University Records):  
Student ID:  

Address:  

City:  
State:  
Zip  

Preferred Phone:  
Email:  

Anticipated Total Completed Credits at the end of the current semester: _______/120 minimum
Anticipated Total Upper Division (3000 or higher) Completed Credits at the end of the current semester: _______/45 minimum
Current GPA: __________(2.0 minimum required)

Are you planning to graduate with a minor(s)?  □ No  □ Yes
If YES, please list your minor(s):  
If YES, have you met with your minor advisor(s) this semester?  □ No  □ Yes

If you have a minor, have you declared your minor(s) with School/College from which it is being conferred?  □ No  □ Yes
If NO, please contact your Academic Advisor immediately.
Are you transferring credits from any other institutions to use toward your degree here?  □ No  □ Yes
If YES, do you have any credit hours that still need to be transferred in?  If yes, please contact your Academic Advisor immediately.

Please list the classes you are taking your final semester to complete your BACJ degree:

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<tr>
<th>Course Prefix/Number</th>
<th>Course Title</th>
<th>Required course for major/minor?</th>
<th>Credit Hours</th>
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By signing below, you the student are stating that the information presented above is accurate and complete to the best of your knowledge, and that you are ready to complete your undergraduate degree at the University of Colorado Denver.

Student Signature: ___________________________ Date: ______________

The student has met all the requirements for the degree
Bachelor of Arts in Criminal Justice

Recommended by:

X ___________________________  __________________
Advisor/Coordinator  Date