Drake UNIVERSITY | College of Business & Public Administration

Graduation Agreement

This Graduation Agreement is not final until reviewed and approved by the Undergraduate Offices and Associate Dean and communicated back to you, the student. If you take classes other than what is agreed to on this document, your graduation may be delayed. If you need help determining requirements, see us.

Name_____ Student ID _____
Cell Phone Number_____ Personal Email_____
Major(s)_____ Minor(s)_____
Track(s)(required for MKTG and MOL)_____ Concentration(s)_____
Graduation Date_____

Current Term_____

Courses	Hours
TOTAL	

Term_____

Courses	Hours
TOTAL	

Term_____

Courses	Hours
TOTAL	

Term_____

Courses	Hours
TOTAL	

Term_____

Courses	Hours
TOTAL	

Term_____

Courses	Hours
TOTAL	

Student Signature_____ Date_____
CBPA Faculty Advisor Signature_____ Date_____

For Audit Purposes
Date Prepared for Review _____
Your GPA's meet graduation requirements: _____ Your GPA's do NOT meet graduation requirements: _____

ITEMS TO BE ADDRESSED:

_____
_____
_____
_____

Reviewer Signature:_____ Date_____
Associate Dean Signature:_____ Date_____