# COMPLETION OF REQUIREMENTS

*(Attach appropriate certification of each completed requirement)*

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| --- | --- | --- | --- |
| Writing Proficiency Examination |  | Date Passed: |  |
| Departmental Comprehensive Exam |  | Date Passed: |  |
| Computer Literacy Course No. |  |  or Examination | Date Passed: |  |
| African American Experience Course No. |  | Date Passed: |  |
| Community Service Hours |  | Date Completed: |  |

# ADVISOR-ADVISEE CONFERENCES

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Comments | Student’sInitials | Advisor’sInitials |
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STUDENT’S SIGNATURE ADVISOR’S SIGNATURE

CHAIRPERSON’S/PROGRAM LEADER SIGNATURE

\*\*\*THIS FORM **MUST** BE ATTACHED TO THE APPLICATION FOR GRADUATION.

APPROVED:

Patrick Carriere, Ph.D., P.E.

Dean, College of Sciences and Engineering

**CSE, 08/2017**