DEGREE AUDIT WORKSHEET

Please return to the Graduation Services Advisor for the degree listed.
The degree cannot be awarded without the completion and return of this form.

Degree Awarded

NAME: _____ **SID:** _____
(Last) (First) (Middle)

EXPECTED GRAD TERM: _____ **DEGREE:** _____ **REQUIREMENT TERM:** _____
(Program) (Plan(s))

Degree # ____ **of** ____ **(List Other Degrees)** _____ **DATE INITIATED:** _____

Advisor Comments or Notes (Additional space on back)	**Course Substitutions**	
☐ *Total Units* _____/_____ ☐ *UD Units* _____/_____ ☐ *MCWA* ☐ *18 of 30 UA UD*	Required Course	Substitute Course
	EX. ECON 200	*EX. ECON 201 & 202 IP @ Pima*

MAJOR 1
ADVISOR: _____ (_____) _____
Print Last Name / Campus Phone Date

MAJOR 2
ADVISOR: _____ (_____) _____
Print Last Name / Campus Phone Date

MINOR
ADVISOR: _____ (_____) _____
Print Last Name / Campus Phone Date

HONORS COLLEGE (If Applicable)**:** _____ **DATE** _____

COLLEGE APPROVAL: _____ **DATE** _____

Student Present: Yes ◉ No ○

Student Signature: _____

EMAIL _____@email.arizona.edu

PHONE _____

Graduation Services Use Only

Advisor Comments or Notes	**Course Substitutions**	
	Required Course	Substitute Course