

STEPHENS COLLEGE APPLICATION FOR HIA BACCALAUREATE DEGREE or CERTIFICATE INSTRUCTIONS

Completed, signed applications are due in the Registrar's Office the semester prior to graduation or completion of your certificate program as follows:

Graduation Month	Application is due by:
May or August	September 30*
December	April 30*

*Note: if this date falls on a holiday or weekend the deadline will be the last business day **prior** to this date.

Your application packet must include the following:

1. **Pages 2 through 5 of the Application for Baccalaureate Degree or Certificate** – application **must include student signature**.
2. If you started your program **prior to Fall 2009**, attach a **completed copy of your degree checksheet**.

If you started your program in **Fall 2009 or later**, please use your Academic plan, which is found under the Register tab when you're logged into My Stephens. You do not need to send a copy of your My Stephens academic plan with your completed application.

All students:

- Verify that you have **completed**, are **currently enrolled**, or **plan to enroll** in all of the requirements listed.
- List the additional courses you plan to take to complete your degree in the 'Courses to be completed next semester' section on page 4.
- If you have an academic plan, and a degree requirement is being met by a class that appears under 'electives' or 'courses not counted', please make a note of the course and requirement it meets in the table provided on page 4 (not applicable to students who entered prior to Fall 2009).
- Please be sure your application is complete and is legible, as we will be using the information you provide to list your name in the Commencement program, to print your diploma or certificate and for the mailing of your diploma or certificate.

If any of your information, or your graduation date, changes after you submit your application, please contact the Registrar's Office immediately.

Thank you!!

Return the completed form to:

Office of the Registrar, Stephens College, 1200 E. Broadway, Campus Box 2067, Columbia, MO 65215

Or, fax completed form and attachments to: 573-876-7279

Or, scan and email the completed form and attachments to: registrar@stephens.edu

STEPHENS COLLEGE APPLICATION FOR HIA BACCALAUREATE DEGREE or CERTIFICATE

(Type or print **legibly**. This information is for your diploma or certificate and the Commencement program)

NAME (as you'd like it to appear on your diploma or certificate):

First Middle Last

Home City/State: _____
(Hometown will be listed in the Commencement Program)

DEGREE PROGRAM:

Year/Term you started at Stephens: _____ Month and Year you plan to graduate from Stephens: _____

Major: Health Information Administration Degree (select one): BS Certificate

COMMENCEMENT (Commencement is open only to those students receiving a Bachelor's degree):

Do you plan to participate in a commencement ceremony? Yes No

If yes, in which ceremony will you participate? May December

PERMANENT HOME MAILING ADDRESS (This is where your diploma or certificate will be sent):

Street: _____ City/State/Zip: _____

Permanent Home telephone number: _____

Cell Phone number: _____

Email address (not your Stephens email): _____

NEWSPAPER RELEASE: Yes No

Name of hometown newspaper : _____

Address: _____ City: _____ State: _____ Zip: _____

Note: A \$100 graduation fee will be applied to your account prior to graduation.
Diplomas and official transcripts will not be released unless the student's financial account has been settled or satisfactory arrangements have been made with the Accounting Office.

Stephens College has permission to include my name, hometown city/state and degree in the Commencement Program.

STUDENT SIGNATURE (Required): _____ **DATE:** _____

DEGREE CHECK WORKSHEET

Student's Name: _____

ADVANCED LEVEL COURSE CREDITS (applies to BACCALAUREATE DEGREES only):

Requirement: You must earn at least 36 semester hours of advanced level credit for a Baccalaureate degree.

Advanced level credit courses are those whose course number is 300 or above. Please highlight the classes that are 300 or 400 level on your academic plan. Courses labeled with a © on your plan are complete and can be included in your EARNED total. Courses labeled with a (P) are in progress and can be included in your IN PROGRESS total.

Number of advanced credit hours **earned** (completed 300 and 400 level courses) = _____

Number of advanced credit hours in which are **in progress** (enrolled this semester) = _____

Number of advanced credit hours (if any) you **plan to take** next semester = _____

Total (Must equal 36 or more) = _____

GRADE POINT AVERAGE (GPA):

Requirement: You must have a cumulative g.p.a. of **at least 2.00** to be eligible to graduate. An overall 2.5 grade point average in the HIA major is required to fulfill graduation requirements.

Your current Cumulative g.p.a. (this is shown at the top of your online transcript): _____

TOTAL SEMESTER HOURS:

Requirement: You must earn at least 120 hours for a Baccalaureate degree.

Overall number of semester hours you've already earned (this is the total at the bottom of your transcript) = _____

Number of semester hours in progress (enrolled this semester and listed as *courses currently enrolled* above) = _____

Number of semester hours (if any) you plan to take next semester (listed as *courses to be taken next semester* above) = _____

Total = _____

REMAINING GRADUATION REQUIREMENTS (courses needed to complete your Academic Plan):

Courses needed to complete your degree, but not yet enrolled:

Course Number (Prefix/Number)	Course Title	Course Credits	Check one for each course listed		
			Enrollment Term*	Required for Major	Elective Credit

*abbreviate term (SP=Spring, SU=Summer, FA=Fall) and year, ex: SP12

Courses on Academic Plan in the 'Courses not counted' section that meet requirements in the major:

Course Number (Prefix/Number)	Course Title	Course Credits	Grade	Section on Academic Plan where these credits apply*

*example: Major requirements, Major electives, etc.

REVIEW OF SENIOR DEGREE CHECK FOR HIA MAJOR

TO:

GRAD.DATE:

FROM: **Program Chair**

DATE:

Degree: Curriculum: Health Information Administration Dept Chair: Margaret Ledda

After reviewing your senior degree check forwarded by the Registrar, the following applies:

You will meet all requirements for the above listed degree, assuming you successfully complete courses currently enrolled and planned for the next term.

Before I can evaluate your degree, please provide the following information:

You must enroll/repeat (E/R) the following courses next semester. The minimum grade is listed that you must earn, either for the specific course or to raise your gpa in the major

_____	(E/R) Grade required _____
_____	(E/R) Grade required _____
_____	(E/R) Grade required _____
_____	(E/R) Grade required _____

You must clear the incomplete(s) now on record for:

_____	Grade required _____
_____	Grade required _____

Supply the information requested on the enclosed Transfer Credit form to obtain approval of the following transfer courses:

In addition to the above, the following deficiency or condition must be met in order to meet the requirements for your degree:

Department Chair signature: _____

Distribution date to Student, Adviser, Registrar by Department Chair: _____