CANCEL INTENT TO GRADUATE

COLLEGE OF SCIENCE & ENGINEERING

Attn: Graduate Studies TCU Box 298960, Fort Worth, TX 76129 817-257-7734, Fax 817-257-7736

http://www.cse.tcu.edu/

Graduation date filed for: May	August	December	Year	
LAST Name	FIRST Name		M.I.	TCU ID#
Major:			Degree:	
Submit this	s form to the Dean's	Office through your TCU	J email account, and email to	
	Valerie Sp	ringer at v.springer(@tcu.edu	
Student's Signature				Date
Dean's Office Signature				Date
REGISTRAR: Please remove	e the name	of this student	t from your gradua	tion list.
NOTE TO STUDENT: Please file a new "Inte	nt to Gradua	te" form for the	semester you intend	l to graduate.
A non-refundable fee i	s charged ea	ch time you sul	bmit an "Intent to Gr	aduate".
"Intent to Graduate" forn http://cse.tcu.edu		_	_	g website: