# Application for Degree Evaluation

Read instructions on reverse before completing this form

<table>
<thead>
<tr>
<th>ID Number</th>
<th>Date of Application</th>
<th>Bulletin Year</th>
<th>For Official School Signature Only</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>20 - 20</td>
<td></td>
</tr>
</tbody>
</table>

- **Print your legal name in full exactly as it is to appear on your diploma:**
  - First Name
  - Middle Name
  - Last Name

- **Street and Number**
  - City
  - State
  - ZIP
  - Telephone

- **Local address to which information is to be mailed prior to graduation:**
  - Street and Number
  - City
  - State
  - ZIP
  - Telephone

- **Hometown & state to be published in commencement program:**
  - Hometown
  - State (or Foreign Country)

- **For which award date are you applying?**
  - September
  - October
  - November
  - December
  - January
  - February
  - March
  - April
  - May
  - June

- **What is your major?**
- **What is your minor?**
- **2nd major?**
- **2nd minor?**

- **List courses still to be completed**
  - CRN
  - Code & No.
  - Course Title
  - Fall Semester 20___
  - Spring Semester 20___
  - Summer Term 20___

- **Do Not Write Below This Line**
  - Attempted
  - Earned
  - GPA

- **Final Total**

- **Grade Point Average (cumulative)**

- **Transfer Credits**

- **Grand Total**

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Mail/fax or e-mail completed form to Karen Sullivan  
ksullivan@hartford.edu  
Phone: (860) 768-4373  Fax: (860) 768-5160