**OKLAHOMA STATE UNIVERSITY**
**OKLAHOMA CITY**

Office of the Registrar
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Oklahoma City, Oklahoma 73107
**O** | 405-945-3291
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# GRADUATION APPLICATION CHANGE REQUEST

**INSTRUCTIONS:** Use this form if you have previously submitted a graduation application and need to change your expected graduation term, your diploma mailing address, or preferred diploma name.

**1. STUDENT INFORMATION:**

Last Name: _____ First Name: _____ Student ID: _____

Email: _____ Phone Number: _____

**2. CURRENT GRADUATION APPLICATION PROGRAM:** (Choose the degree type, then indicate the major)

☐ A.A.S.          MAJOR _____

☐ A.S.

☐ B.T.

☐ CERTIFICATE

**3. EXPECTED GRADUATION TERM:** (Choose the term type, then indicate the year)

☐ SPRING          YEAR _____

☐ SUMMER

☐ FALL

**4. DIPLOMA MAILING ADDRESS (OPTIONAL)** To change your diploma mailing address, please complete the following:

Street Address: _____

_____

City, State, Zip, Nation: _____

**5. PREFERRED DIPLOMA NAME (OPTIONAL)**

Use this section to update how your name will appear on your diploma (e.g. preferred first/middle name, special capitalization or punctuation). Diploma names must reflect the legal last name and should never be used for misrepresentation. Plesa submit a Correction or Change of Name form with supporting documentation to update your legal last name in the university system.

First Name: _____ Middle Name (optional): _____ Suffix (optional): Jr.  Sr.  II  III  IV

**SIGNATURES**

Student Signature: _____ Date: _____

| REGISTRAR OFFICE USE ONLY | |
|---|---|
| Processed By: _____ Date:_____ | Revised: 2/4/2026 |