



San José State
UNIVERSITY

GRADUATION DATE CHANGE FORM

TO: Undergraduate Evaluations and Graduation
One Washington Square
San José, CA 95192-0200

DATE: _____

Please change my anticipated term of graduation:

from _____ to _____
(Month and Year) *(Month and Year)*

(Please Print Name: Last Name, First Name)

Mail diploma to this address:

(SJSU ID or Social Security Number)

(Student's Signature)

Email address: _____

\$10.00 fee paid/receipted at the Bursars Office and returned to Undergraduate Evaluations and Graduation for processing.

Please note:

- Graduation date changes will be accepted up to the first day of classes for the intended graduation term, however delays in receiving your diploma may occur if not filed by the published priority deadlines in the Schedule of Classes.
- If this form is not received in the Evaluations Department before the first day of classes of the intended date of graduation, your graduation will be processed for the next available graduation date.