

Registrar's Office 501 Crescent Street New Haven, CT 06515-1355

Phone: 203-392-5301 Fax: 203-392-7144 Email: registrar@southernct.edu Web: www.southernct.edu/registrar

## Posthumous Degree/Certificate of Academic Achievement Request

Undergraduate and graduate students who are enrolled in degree or certificate programs at the time of their death, who will have completed at least 75% of their degree or certificate program requirements will be eligible to receive their degree or certificate posthumously.

Undergraduate and graduate students who are enrolled in degree or certificate programs at the time of their death, who will have completed less than 75% of their degree or certificate program requirements will be eligible to receive a Certificate of Academic Achievement in Memoriam.

To receive a Posthumous Degree or a Certificate of Academic Achievement in Memoriam a student must be in good standing at the University at the time of his or her death. A request for either a Posthumous Degree or a Certificate of Academic Achievement in Memoriam would usually be made by the relevant Department or Program, following consultation with the student's family.

Student ID:					
Student Name:					
Requester Name:					
Relation to Student:					
Telephone Number:					
Requester Signature:		Date:			
•	mitted to the Registrar's Office. Your request wi a and progress in the program. Please allow wit		,,,,	•	review
Office Use Only					
Registrar 's Office	Certification of Good Standing:	Yes	No (not eligible)		
	Program Completion 75% or higher:	Yes	No		
	Note: Transcript and degree evaluation are	attached for yo	ur review.		
Department Chair Signature:		Date: _		Approved	Denied
School Dean Signature:		Date: _		Approved	Denied
Graduate Dean Signature (if applicable):		Date: _	Date:		Denied
Provost Signature:		Date: _	Date:		Denied
President Signature:		Date: _		Approved	Denied