Registrar's Office



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GRADUATION PLANNING SHEET

Use this document to help verify the completion of all graduation requirements.

	their DegreeWorks report prior to meeting with their advisor. The advisor aking any needed modifications. The student should keep a copy of the sh tion plan on the student's "Plan" tab in DegreeWorks.
NAME:	ID#:
Phone #:	E-Mail (if used):
Which semester do you plan on completing Spring / Summer / Fall Aca	
	ow to indicate all outstanding graduation requirements. Be s rk required (i.e., exit exam, studio requirements, etc.)
Fall(Year)	Spring(Year)
	
Summer(Year)	Other: *
*Please indicate when and how you plan on	n completing these requirements.
	an will complete my graduation requirements. I acknowledg t after registering for classes to ensure all requirements hav
Student Signature	 Date
Faculty Advisor Signature	Date Date Received:
	Date Neceiveu.