WOODSWORTH COLLEGE DEGREE REQUEST FORM
(Please print legibly)

Surname: ______________________________  Given name(s): ______________________________
Student Number: ________________________  Daytime phone: (__________)__________________
UTmail: ________________________________@mail.utoronto.ca

Address: ___________________________________________________________________________
                               Street                                      Apt./Unit
                               ___________________________________________________________________________
                               City/Town                                      Province                                      Postal Code

1. **Degree Options** (please read carefully and make your degree selection below):

   **CURRICULUM RENEWAL DEGREES**
   *Students registered prior to September 1992 who wish to graduate with a Curriculum Renewal degree must complete a Curriculum Renewal Opt-in form with an academic advisor*
   - Honours Bachelor of Arts (HBA)
   - Honours Bachelor of Science (HBSc)
   - Bachelor of Commerce (BCom)
   - Bachelor of Arts (BA)
   - Bachelor of Science (BSc)  
     
     **PRE 1992 DEGREES**
     - 4 Year Bachelor of Arts
     - 4 Year Bachelor of Science
     - Bachelor of Commerce
     - 3 Year Bachelor of Arts
     - 3 Year Bachelor of Science

2. **Please list your Subject POST(s):**  (Specialist/Major/Minor Programs)
   - SPE  MAJ  MIN
   - SPE  MAJ  MIN
   - MIN

3. **Request:**
   - ADD my name to the Graduation List for:  ○ JUNE  ○ NOVEMBER
   - REMOVE my name for the Graduation list (include reason for cancellation below)

   ___________________________________________________________________________

   - CHANGE my Degree Bid from ______________________ to ______________________
   - UPGRADE previous degree received from the University of Toronto

Student Signature: ___________________________________________  Date: ______________________

**Important Reminder:** It is the responsibility of the student to ensure that all degree requirements will be complete by the time of graduation. If you have any questions or concerns you should contact the Registrar’s Office without delay. You are also advised to check your program (e.g. Specialist, Major, Minor) requirements with the Department(s) concerned.

**For office use:**
Process date: ______________________  Notes: ________________________________________