

DEGREE REQUIREMENTS REVIEW

Instructions

1. Fill out the **Degree Requirements Review** form as completely as possible.
2. Submit the **Degree Requirements Review** form to the Registrar's Office (OM 230), email to DegreeEval@wwu.edu, or mail to:
Registrar's Office, WWU Old Main 230, 516 High Street, Bellingham WA, 98225-9008.
3. A **\$45.00** review fee will be posted to your student account, or can be paid by check payable to WWU at the time of application.

Review Information

- If you have earned credits from another institution since you attended WWU, or your last quarter at WWU was more than 15 years ago, send official transcripts to the Registrar's Office.
- Your records will be reviewed by a Degree Evaluator and by the major (and minor, if applicable) department to assess remaining requirements.
- Reviews take approximately 3-6 weeks. A Degree Evaluation will be sent to your provided email address below that will outline any outstanding requirements, options for completion and further action you will take to complete your degree.

PRINT YOUR NAME	STUDENT NUMBER (if known) W
FORMER NAME(S) as WWU Student	YEAR OF LAST ATTENDANCE
EMAIL	PHONE (include area code)
INTENDED MAJOR: <div style="text-align: right;"><input type="checkbox"/> NOT SURE</div>	DATE OF BIRTH (MM/DD/YYYY)
INTENDED MINOR (if applicable):	Were you a FAIRHAVEN COLLEGE student? <input type="checkbox"/> YES <input type="checkbox"/> NO
TRANSFER INSTITUTION(s) attended since WWU:	Had you previously applied for graduation? <input type="checkbox"/> NOT SURE <input type="checkbox"/> YES <input type="checkbox"/> NO
How do you plan on completing your degree requirements? (Check all applicable.) <input type="checkbox"/> Return to main campus <input type="checkbox"/> WWU Extended Education online and/or self-paced courses <input type="checkbox"/> Through another regionally-accredited institution with preapproval from department/Registrar's Office <input type="checkbox"/> Other (specify)	When do you plan to complete your degree?
SIGNATURE (required)	Date
OFFICE USE ONLY	
Reviewed By _____ Fee: <input type="checkbox"/> Billed \$45 <input type="checkbox"/> Previously Paid DFEE/Waived <input type="checkbox"/> Academically Dismissed <input type="checkbox"/> Fresh Start Eligible Student Notified By (Initial/Date) _____	