



**LAMAR INSTITUTE
OF TECHNOLOGY**

INTENT TO GRADUATE

STUDENT NAME: _____ T#: _____
(FIRST) (LAST) (STUDENT ID)

ACADEMIC DEPARTMENT (*CHECK ONE*): **BSTC** **GEDS** **HCAS** **IAET** **MATT** **PBSS**

ACADEMIC PROGRAM: _____

GRADUATION SEMESTER: _____ (*CHECK ONE*): **FALL** **SPRING** **SUMMER**
(YEAR)

MyLIT EMAIL ADDRESS: _____

GRADUATE NAME PRINTED IN COMMENCEMENT PROGRAM (*CHECK ONE*): **YES** **NO**

STUDENT INFORMATION:

DATE OF BIRTH: _____ VETERAN (*CHECK ONE*): **YES** **NO**
(MONTH / DATE / YEAR)

CELL PHONE: _____ ALTERNATE PHONE: _____
(INCLUDE AREA CODE) (INCLUDE AREA CODE)

DUAL ENROLLED CAMPUS (IF APPLICABLE): _____

LIST ALL DEGREES AND CERTIFICATES YOU ARE APPLYING TO RECEIVE:

- | | | | |
|----|--------|-------------|--------------|
| 1. | DEGREE | CERTIFICATE | MAJOR: _____ |
| 2. | DEGREE | CERTIFICATE | MAJOR: _____ |
| 3. | DEGREE | CERTIFICATE | MAJOR: _____ |

FOR LIT USE ONLY

APPROVAL LEVEL	SIGNATURE	DATE
PROGRAM LEVEL		
DEPARMENT LEVEL		

NOTES:

INSTRUCTIONS: Please return the form to your departmental office. Following the submission of the Intent to Graduate form and department review and approval, you will receive an email to complete your Graduation Application in Self-Service Banner.

Healthcare and Sciences – HCAS@lit.edu

Business Technologies – BSTC@lit.edu

General Education – GEDS@lit.edu

Public Service and Safety – PBSS@lit.edu

Industrial and Engineering Technology – IAET@lit.edu

Manufacturing and Trades Technology – MATT@lit.edu