College of Communication
Intent to Graduate

Your degree plan must be on file before this check can be completed.
Please do not apply for a degree plan until you have completed 88 hours.

Last Name, First Name, Middle Initial _____ TCU ID _____ Date _____

TCU Box or Street Address _____ City _____ State _____ Zip _____

Home Address _____ City _____ State _____ Zip _____
Phone _____ Cell _____ EMail _____

☐BA ☐BS **Select One** _____ _____ _____
Degree Sought Major 2nd Major/Degree Minor/Emphasis

☐ Communication Studies ☐ Human Relations ☐ Analysis ☐ Industry ☐ Production
***COMM Emphasis** ***RTVF Emphasis**

_____ _____ _____
Semester Entered TCU Catalog Requirement Term Advisor

Expected Graduation Date _____ Hours Completed _____ GPA _____

College Evaluation
Do Not Complete Below This Line

Major Hrs: _____ Minor Hrs: _____ Cumulative Hrs: _____
Upper Level Hrs:

Courses in Progress		**Courses to Be Completed**		**Other Requirements to Meet**
Semester:	HRS	Semester:	HRS	After , your registration must include:
				_____ hours upper level
				_____ Writing Emphasis
				Additional Comments:

_____ _____
Approved By Date

cc: Student
Department