



Office of the Registrar
Dining Hall
Room 128
registrar@qc.cuny.edu

WINTER GRADUATION

Student Information

CUNYfirst ID: _____ Phone: _____
First Name: _____ Last Name: _____
Signature: _____ Date: _____

By submitting this form you are requesting to apply for Winter graduation.

The priority filing date for this form is January 1.

Please note:

- Submit this form to **registrar@qc.cuny.edu**, using only your **Qmail**.
- Communications regarding your graduation status will be sent to your QMail account.
- Approximately three months after graduation, your diploma will be mailed to you. Your diploma will be mailed to the mailing address on your CUNYfirst record. Please verify your address information in your CUNYfirst account before the end of the semester.

For Office Use Only

Received by: _____ Date: _____ Notes: _____
Processed by: _____ Date: _____ Notes: _____