



QC Hub  
Dining Hall  
Room 128  
[qchub@qc.cuny.edu](mailto:qchub@qc.cuny.edu)

## CANCELLATION OF GRADUATION

CUNYfirst ID: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First M. I.

I, \_\_\_\_\_, hereby rescind the graduation I filed for

Semester: Fall Spring Summer Year: 20\_\_\_\_

Career: Undergraduate Graduate

I understand that once I sign and submit this form to the QC Hub, I will not be permitted to reverse my request. I also understand that I will be required to re-file an application for a future graduation.

My reason for making this request is:

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**Contact Information:**

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

QC Email Address: \_\_\_\_\_@qmail.cuny.edu

\_\_\_\_\_  
Student's Signature Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Summer 2020 ER

.....**DO NOT WRITE BELOW THIS LINE**.....  
Term Activated for \_\_\_\_\_ term Processed by \_\_\_\_\_ Publications notified \_\_\_\_\_