



Recommendation for Awarding a Posthumous Degree or Certificate Form

In accordance with Boise State University Policy #4110

I, _____, recommend _____ be considered
Print Name and Title Student Name

for the awarding of a Posthumous Degree or Certificate.

Student ID _____ Degree/Major _____

Please check one:

☐ **Undergraduate Degree or Certificate of Recognition**

Student had no more than 16 credit hours of the requirements for graduation to complete and was enrolled within the past two regular semesters. The student's transcript will show a notation that the degree was awarded posthumously. In cases where the student does not meet the posthumous degree requirements, a certificate of recognition will be awarded to recognize the student's progress toward the attainment of a degree. The certificate will be noted on the student's transcript.

☐ **Graduate Degree or Certificate of Recognition**

Student had no more than 9 credit hours of the requirements for graduation to complete and was enrolled within the past two regular semesters. The student's transcript will show a notation that the degree was awarded posthumously. In cases where the student does not meet the posthumous degree requirements, a certificate or recognition will be awarded to recognize the student's progress toward the attainment of a degree. The certificate will be noted on the student's transcript.

Once the Registrar's Office verifies and posts the approved posthumous degree or certificate, they will provide the diploma/certificate, a diploma cover, and a mailer. Please indicate to whom on campus the diploma/certificate should be delivered.

Name _____ Phone Number _____

Boise State Email Address _____ Campus Location or Mail Stop _____

I approve the awarding of the posthumous degree or certificate:

Dean of Student's College _____ Date _____

Dr. Marlene Tromp, University President _____ Date _____