Application   for Graduation

Please complete and return this Application for Graduation to the Registrar's Office   before the deadline.   Filing the Application for Graduation triggers a degree evaluation with the Registrar's Office to   verify   eligibility for   graduation and c ommencement.

Student PRN/ID: 910____   _____   Name:_____   _____

Class Year: 20_____   Major:_____   Advisor:_____

Degree type: ? % D F KrHofARs   ? Associate/Bachelor of Science   ? 0 D V W H U V   Graduate   ? Doctorate

Major(s): _____   _____

Minor(s): _____   _____

When do you expect to complete your degree requirements?   ? $ X J X V W December   ?   May

<u>In the box below</u>   , neatly print your legal name   as you would like it printed on your diploma, including any periods, hyphens, apostrophes, and spaces, as wells as upper and lower case letters.

Provide your current "permanent" addr   ess: _____)_____81 c -0.004g_____r di1.227 Td [

_____

Your phone number at UNE: _____   UNE E   - mail: _____

Do you expect to participate in the May Commencement Ceremony?   ? Yes

Participation in the May Commencement Ceremony will require that you have met the follov