

APPLICATION FOR GRADUATION

Office of the Registrar/Admissions PO Box 749 Barrow, AK 99723 907-852-1754 or 1757 fax: 907-852-1784 registration@ilisagvik.edu

Please see academic calendar in current catalog for graduation application deadlines. Non-refundable graduation application fee is \$50. Late application fee is \$100. Students who apply for graduation and do not complete their program requirements at the end of the term must reapply for graduation and pay appropriate fee. Diploma replacement or duplication fee is \$20. **An official degree audit will be automatically processed upon submission of this form.**

PLEASE	PRINT YOUR N	AME EXACTLY AS IT W	/ILL APPEAR O	N YOUR DIPLOMA
First		Middle or Initial		Last
CELL PHONE:		OTHER PHONE:		
ADDRESS TO SEND	DIPLOMA: _			
		Street/PO Box		
	_	City	State	Zip
EXPECTED DATE O	F GRADUATION:			
SPRING SUI	MMER FALL	. YEAR	_	
LEVEL AND PROGR	AM: (Check all t	hat apply)		
Degree	Certificate	Endorsement		
Program(s)				
PARTICIPATION IN	GRADUATION CI	EREMONY:		
The annual graduation ceremony is held in the spring. All candidates who complete their requirements during the school year (including the previous summer) are invited to participate in the ceremony. Indicate below whether or not you will attend the ceremony.				
Please advise us if t	here is any chang	ge in your plan to attend	the graduation	ceremony.
lf so, i I will not be p	oresent for gradu	e (S-XL) and He		
AFTER GRADUATIO	N I AM			
Seeking employment Getting a promotion Transferring to Continuing courses at llisagvik				
Student Signature:			Date:	
Faculty Advisor Sign	nature:		Date:	
Registration Office:			Date:	