



APPLICATION FOR GRADUATION

Office of the Registrar
P.O. Box 749
Barrow, AK 99723
Phone: 907.852.1757 or 1763
Fax: 907.852.1784

Graduation Filing Deadlines: Please see Academic Calendar in current year catalog. A non-refundable \$50 fee is charged for each application. A late deadline 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. For Diploma replacement or duplication fee is \$20.

PLEASE PRINT YOUR NAME EXACTLY AS IT WOULD APPEAR ON THE DIPLOMA.
NOTE: An official DEGREE AUDIT will be processed automatically with submission of this form; there is no need to submit an additional degree audit form.

NAME: _____

CURRENT MAILING ADDRESS	If you have other address after graduation please fill this part out
Mailing Address: _____	Mailing Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Day Phone number: _____ Evening Phone number: _____	

DEGREE INFORMATION

Expected Date of Graduation: Spring Summer Fall Year: _____

I am applying to receive in the following program(s): *(Check all that apply)*

Degree _____

Certificate _____

Endorsement _____

PARTICIPATION IN THE GRADUATION CEREMONY: 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 there is any change in your plans to attend the graduation ceremony.

I will be present for graduation.

I will not be present for graduation.

I do not wish my name and degree to be printed in the commencement program.

PLEASE LIST INSTITUTIONS PREVIOUSLY ATTENDED; DEGREES EARNED; DATES OF GRADUATION

Institution Name	Degree Earned (if any)	Date of Graduation

Student's Signature: _____	Date: _____
----------------------------	-------------

RECEIVED

Office use only