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REGISTRAR'S OFFICE

11120 GLACIER HWY., JUNEAU, AK 99801 TEL: (907) 796-6100 FAX: (907) 796-6365

APPLICATION FOR GRADUATION & COMMENCEMENT

Please Print Clearly	l intend to c	I intend to complete my degree: I will be attending spring			Certificate/Degree [] Certificate (no fee)	
			Campus	•	[] Associates	
student ID	VIEWING ISSUES: If when v	viewing this document usin		ser you notice that pages	s are not helding or prir [] Masters [] Occupational Endo	
last name first name mi (your name will be printed the same as official s			campus w	rhere you will be attending) nding	[] Graduate Certificat [] Workforce Credenti *Recipients are recognic commencement prograwhere they completed to	ial* (no fee) zed in the am at the campus
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evening/message tel	Ketchikan: St	store, (907) 796-6401 udent Services, (907) 228-45	08		ne graduate fee (see deadlii a \$25	nes above)
e-mail address	Sitka: Recepti	on Desk, (907) 747-6653		Name when awar		
×	degree) in summer	UAS publishes graduation information (your name and certificate/degree) in the commencement program each spring (includes summer and fall graduates) and the local newspapers in Juneau, Ketchikan, and Sitka each semester.]	o) [] Mastercar	1414004
applicant signature (required)	data	e will be published unless it is m		credit ca		exp. date (month/year)