



Two Photograph  
Size 3\*4

**Rift Valley University Adama Campus  
Office of the Registrar**

**Graduation Application Form to be completed by prospective graduate**

**A. The Purpose of this form is**

1. To ensure that academic records of prospective graduates are processed in due time.
2. To secure the exact spelling (in English and Amharic) of the candidate who will graduate in Master's and Bachelor's degree preparations.

**B. Instructions**

1. No graduation will be processed unless this application is completed and submitted to the office of the Registrar before the deadline.
2. This form is to be completed by the candidate only. The candidate cannot introduce a new name or a major departure in spelling from that used at the time of admission.
3. If the spelling form is not properly filled by the applicant, a penalty of Birr 200.00(Two hundred) will apply for replacement.

**C. Required information**

1. Faculty \_\_\_\_\_ Academic Program \_\_\_\_\_
2. Candidate's name in block letters: (First Name, Father's Name, Grandfather's Name) \_\_\_\_\_

2.1 English \_\_\_\_\_

2.2 Amharic \_\_\_\_\_

3. University ID. No. \_\_\_\_\_

**4. Candidate for Graduation in**

4.1 Master's Degree ☐

4.2 Bachelor's Degree ☐

**5. Program Modality**

5.1. Regular ☐

5.2 Extensions ☐

5.3 Weekend ☐

6. Date of birth \_\_\_\_\_ (G.C) \_\_\_\_\_ (E.C)

7. Test date or Dates of National Exam. \_\_\_\_\_

8. High school Name \_\_\_\_\_

9 Current Address Tel. Home \_\_\_\_\_ Office \_\_\_\_\_

P.O. box \_\_\_\_\_

Email \_\_\_\_\_

**10. Advisor or department head approving candidacy**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

I certify that the above information is complete and correct, and I authorize the University to use the name and spelling I provided above.

Applicants signature \_\_\_\_\_

Date \_\_\_\_\_

**D. At Collection time**

I have collected my credential from the University on \_\_\_\_\_

Signature \_\_\_\_\_

