

GRADUATION APPLICATION			
Student Name:	Email:		
Semester Graduating:	Phone Number:	Current GPA:	
Major:	Concentration(s): (if applicable)	Minor(s): (if applicable)	
Credits Earned to Date:	Credits Currently Taking:	Remaining Credits: (if any)	
If there are any credits remaining to finish your degree a	It the time of commencement, where/how are	you planning on completing those credits?	
I understand that should my graduation be demay only apply for graduation if I plan on connotifications and correspondence from the UniNAU student email account. Additionally, mysystem.	npleting my required credits before the versity pertaining to commencement	e start of the next full semester. All will be conducted through my	
I plan on attending commencement	I <u>DO NOT</u>	plan on attending commencement	
E	mployment Information		
Employer Name:	Employer Phone: :		
Country: Address:			
State: Zip Code: Job Title: Job Responsibilities (Please provide a brief description of your job duties):			
Employment Status: Full-time Part-time	_	Inpaid	
Supervisor's Name: Supervisor's E-mail:		<u>:</u>	
Supervisor of Emun.			

Ph: 832-230-5188

Email: registrar@na.edu

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Employment Information

I am new to this job and this employ	er. Job start date:/(mm/dd/yyyy).	
I have been employed with my consition/promotion as of:/		kills acquired in my program resulted in a new
nitial start date with the current employer:] (mm dd yyyy).	
Initial position with the current employer:		
	nt company/organization and the degree received/tl /dd/yyyy). Initial start date with the current employer:	
	employer and the degree received/the skills acquire ent employer:/(mm/dd/yyyy).	ed in my program resulted in a maintaining my
I am self-employed as of://_	(mm/dd/yyyy).	
	ith my employment goals, is vocational, and is based on a	and related to the education and training I received; and I
ım earning training-related income.		
I am not employed.		
t:C. tlt tll :Ct: :t T -l	NAII	·
•	so give NAU permission to contact my employer to verif	y my employment. Date
certify that the above information is correct. I al Student Signature	so give NAU permission to contact my employer to verif	
•	so give NAU permission to contact my employer to verif	
Student Signature , the advisor and/or chair have reviewed thi	s student's application and record and recommend	Date that the student be placed on the list of prospective
student Signature the advisor and/or chair have reviewed this traduates for the degree and major/concentr	s student's application and record and recommend ation indicated. Final certification will be determine	that the student be placed on the list of prospective after receipt of final grades and test scores.
student Signature the advisor and/or chair have reviewed this traduates for the degree and major/concentr	s student's application and record and recommend	Date that the student be placed on the list of prospective
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