

University of Northern Iowa
GRADUATION APPLICATION - BACHELOR'S DEGREE

*Students graduating at the end of the semester must complete this form and return it to:
University of Northern Iowa, Office of the Registrar, 243 Gilchrist Hall, Cedar Falls, IA 50614-006*

Student No. _____ Degree Completion Date _____

Today's Date _____ Graduation Ceremony Attending _____
Month Year
Month Year

NAME (to be printed on diploma & in commencement program) _____

HOME TOWN (to be listed in commencement program) _____

(Graduation information will be sent to your local address)

LOCAL ADDRESS _____ Ph (_____) _____
Street City State Zip

HOME ADDRESS _____ Ph (_____) _____
Street City State Zip

NON-TEACHING

TEACHING

Major(s)

Major(s)

Minor(s)

Minor(s)

Areas of certification other than major and/or minor:

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

SR# _____

MIN HRS _____

HRS REC _____

NEEDS:
100 MAJ _____

WCX _____

LAB _____

FRN LNG _____

UNI GPA _____

CUM GPA _____

MAJ GPA _____

DEFICIENCIES: