

GRADUATION REQUEST

- 1) Students should submit a Graduation request in the semester they complete their program.
- 2) The application fee is \$25.
- 3) For more information see ufv.ca/registrar/graduation/

By including an address below I understand this will become my mailing address for official correspondence from UFV.

P E R S O N A L	UFV student number 	Student's full legal name
	Street Address	City and Province
	Country	Postal Code

C R E D E N T I A L S	Name (Your legal name will be printed on your parchment. If your legal name has changed please submit a "Personal Information Change" form to the Registrar's Office.)		
	It is recommended that students check with their program advisor prior to applying to graduate. I am applying to graduate from the following:		
	Program	Completing as of: Y Y Y Y M M	NOTE: Requirements must be completed by the end of the Winter semester to attend the June ceremony.
	<input type="checkbox"/> Degree	<input type="checkbox"/> Associate Degree	<input type="checkbox"/> Diploma <input type="checkbox"/> Certificate
Specify other options, if applicable (<i>co-op, majors, extended minors, minors, options, specializations</i>):			

C O N V O C A T I O N	Graduation (June 2021) <input type="checkbox"/> YES , I will be attending <input type="checkbox"/> NO , I will not be attending	
	Parchment <input type="checkbox"/> MAIL Please check one of the following The graduation diploma (parchment) will be sent through regular mail. Students may request registered mail (Canada only) or courier by contacting staff in the Registrar's Office and paying an additional fee.	<input type="checkbox"/> CONVOCATION I will pick up my parchment at the Graduation ceremony in June.
	NOTE: All obligations relating to fees must be met before parchments will be released. Convocation ceremonies are held in early June. Details will be mailed out in late April. See ufv.ca/convocation for details.	

STUDENT'S SIGNATURE: _____ **DATE:** Y Y Y Y | M M M | D D

FREEDOM OF INFORMATION/PROTECTION OF PRIVACY. The information on this form is collected under the authority of British Columbia's Freedom of Information and Protection of Privacy Act [(RSBC 1996) chapter 126] and the University Act. This information is used only for the administration of academic programs and providing educational and related support services, including advancement and alumni relations. Therefore, it will also be provided to the Advancement and Alumni Relations Office and the UFV Alumni Association. If you have any questions about the collection and use of this information, contact the Enrolment Services Coordinator at 604-854-4501 or reginfo@ufv.ca.

OFFICE USE ONLY			
Entered date	Delivered date	Sequence #	Program code

<input type="checkbox"/> Visa	<input type="checkbox"/> American Express	<input type="checkbox"/> Cheque	Card number 	Expiry date
<input type="checkbox"/> MasterCard	<input type="checkbox"/> Debit	<input type="checkbox"/> Cash		