

**UNIVERSITY OF ARKANSAS AT PINE BLUFF**

**Admissions and Academic Records**

1200 North University Drive

**APPLICATION FOR GRADUATION**

I hereby make application for the degree of

Bachelor of Science  
Bachelor of Arts  
Masters

Will you participate in the commencement exercise?

Yes/No \_\_\_\_\_

If no, please provide a mailing address for your diploma and a contact number.

To be conferred (*check only one, please*)

\_\_\_\_\_ Spring Semester (May Commencement)  
\_\_\_\_\_ Fall Semester (December Commencement)

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Telephone# \_\_\_\_\_

Current Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Major \_\_\_\_\_

Your name as you wish it to appear on degree:

(*Please print legibly*)

Local Telephone# \_\_\_\_\_

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*ID Number*

\_\_\_\_\_  
*Date*

*Height* \_\_\_\_\_ *Weight* \_\_\_\_\_

This information is needed in order to obtain the proper size gown for you. (Misleading information will result in your possibly not having a gown that fits appropriately.)

In order to assist us in preparing you for graduation, please make sure that your advisor is aware that you are applying for graduation.

**Please return application to:**

**University of Arkansas at Pine Bluff  
Office of Admissions & Academic Records  
1200 N. University Drive--Mail Slot 4983  
Pine Bluff, Arkansas 71601**

**NOTE: IT IS IMPERATIVE THAT ALL SENIORS AND GRADUATE STUDENTS SUBMIT AN APPLICATION FOR GRADUATION**