Application for Graduation

(Insert Expected Graduation Year/Ex. 2023) _____

Please print legibly and complete each line of this application. Return form to Academic Records by the deadline stated on the application. Applications received after the deadline may result in a delay of degree and regalia availability.

COMPLETE TO ENSURE PROPER IDENTIFICATION AND HANDLING

Student ID or Social Security Number _____   Phone Number (Area Code) _____

Full Name (First, Middle, Last) _____

Current Mailing Address (City, State, Zip) _____

Return application to:

University of Arkansas to Pine Bluff – Academic Records
1200 N. University Dr. – Mail Slot 4983 (Room 109 Administration Building)
Pine Bluff, Arkansas 71601 ~ ~ (870)