



Office of the Registrar • Woody Hall
1950 Third Street • La Verne, CA 91750
909.593.3511, Ext. 4008 or 4325 • Fax: 909.392.2703
email: reg@laverne.edu • www.laverne.edu/registrar

APPLICATION FOR GRADUATION

PLEASE PRINT YOUR NAME EXACTLY AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA.

Form for name entry with checkboxes for Mr., Mrs., Ms. and fields for First Name, Middle Name, Last Name.

Mailing Address

City State Zip

Home Number () Alternative Number ()

ULV Student Identification Number with eight digit boxes

DEGREE INFORMATION MUST BE LISTED IN THE UNIVERSITY OF LA VERNE CATALOG.

Degree Major Minor

Concentration Emphasis

INDICATE THE SEMESTER/TERM YOU PLAN TO COMPLETE YOUR FINAL COURSEWORK TOWARD THIS DEGREE.

Fall Year January Year Winter Year Spring Year Summer Year

Please indicate if you would like to authorize the inclusion of your name, academic honors, degree and major in all commencement ceremony related publications. Please note if you check no your name will not be printed in the commencement program and on the University website. YES NO

Office of Registrar Official Use box containing fields for File Name, Date, Amount Paid, Degree Sequence, Center/Location, Advisor, Commencement Year, ULV GPA, OAGPA, Institutional Honor, Degree Date, Diploma Date, Date Post, Posted By, Financial Hold, Date Diploma Mailed.

Student Signature

Date