University of Belize

<u>Application for Completion of Program</u>

Student ID #:_____

1. **NAME** (Print in capital letters as it appears on permanent records)

_____   _____   _____
       (Last Name)   (First Name)   (Middle Name)

2. **NAME TO APPEAR ON DIPLOMA** (If name is different from above, submit legal documents with change of name eg. Marriage certificate)

_____   _____   _____
       (Last Name)   (First Name)   (Middle Name)

3. **Date of Birth: dd____/mm____/yyyy_____**
4. **Mailing Address**: _____
5. **Contact Information:** e-mail address:_____ Current phone #:_____
6. **Program being completed (for example, ABIO-Associate Biology)**:_____
7. **Indicate Campus**: O Belmopan   O Belize City   O Punta Gorda   O Central Farm

_____   _____
           Student Signature   Date

DEADLINES FOR COMPLETION APPLICATIONS ARE AS FOLLOWS:

____*Completion in **May** is the last Monday in September

____*Completion in **Summer** is the last Monday in February

____*Completion in **December** is the last Monday in April

*Please place a checkmark for the completion you are applying for and note the following:

    Students Completing in May graduate in June

    Students completion in Summer or December graduate in February

OFFICE USE ONLY

Tentative Semester End Date of Program: _____

Completion Fee: **$125.00**

Receipt Number: _____

Receipt Date: dd _____ /mm _____ /yyyy _____