



UNIVERSITY OF BELIZE
Application for Completion of Program

Student ID _____

1. NAME (print name in capital letters as it appears on permanent record)

_____ (last) _____ (first) _____ (middle)

2. NAME to appear on diploma. (If name is different from above, please print name clearly and submit legal document with change of name e.g. marriage certificate)

_____ (last) _____ (first) _____ (middle)

3. Mailing Address (Where you are guaranteed mail delivery) _____

4. Date of Birth ___ dd___ /mm___ /yyyy Current Day Phone: _____

5. E-mail address: _____ Program being completed (Include campus): _____
eg. BPRE – Belmopan

6. Include courses currently enrolled in and courses to be completed. Use course codes only eg. SOCL 2014

CURRENTLY ENROLLED

TO BE COMPLETED

Date

Signature of Student

DEADLINE FOR GRADUATION APPLICATION ARE AS FOLLOWS:

- * Completion in June is last Monday in September
* Completion in Summer is last Monday in February
* Completion in December is last Monday in April

*Please Place a check mark for the completion you are applying for.

Office use only: Start Date for program dd ___/mm ___/yyyy ___

Clearance Fee: \$125.00, Receipt#: _____ Receipt Date: dd ___/mm ___/yyyy ___