

## **Diploma Cover Presentation**

Degree Recipient's Information (Please Print)	
Student Name:	Student Degree:
Student Graduation Term:	Ceremony: Friday Sat-AM Sat-PM
Student is what relation to faculty:	Son Spouse Parent Daughter
Presentation Policy	
Trustees or faculty may present diplom	resent a diploma must request the opportunity to
diploma scroll presentation, please con	cheduled for graduation, and desire to make the applete the information requested and submit this the announced deadline. You may submit by registrar@una.edu.
Faculty Information (Please Print & Sign)	
Faculty Name:	Faculty Department:
Faculty Signature:	Date:
*By signing this form, I certify that the above	listed student is either my child, spouse, or parent.
Official Use Only Processed By:	Date:

Office of the Registrar | University of North Alabama | UNA Box 5044 | Florence, AL 35632 | 256.765.4316 | Registrar@UNA.edu