

Change of Graduation Information



Name: _____ Graduation Term on Record: _____

Student ID: _____ UNA Email: _____

All correspondence regarding this form will be sent to your UNA email account.

*If you are changing your **degree, major, minor, or concentration**, you must complete a **Change of Program form**.*

Please change the following information on my current graduation application:

- ☐ Graduation Date: (can only be changed to a future term)
 - Please change my graduation term to: _____
- ☐ Name On Diploma
 - I would like my name to appear as: _____
- ☐ Catalog Year: (Requires Department Chair and Advisor's approval)
 - I would like my catalog year to be: _____
 - Advisor Signature: _____
 - Department Chair Signature: _____
- ☐ Diploma Address
 - Please mail my diploma to this address:

- ☐ Ceremony Attendance:
 - ☐ Attending
 - ☐ NOT Attending

Student Signature: _____ Date: _____

Office of the Registrar
UNA Box 5044
Florence, AL 35632-0001
P: 256.765.4316
F: 256.765.4349
Email: graduation@una.edu