



APPLICATION FOR COMPLETION OF PROGRAMME/GRADUATION

Student ID number: **PERSONAL DETAILS**

Last Name: First Name: Middle Name: Date of Birth:

Note: Write your name as it appears on your birth certificate.

Postal Address:

Telephone: Fax: Email:

Programme:	Major 1:	Major 2:	Minor:
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Programme being completed: Certificate Diploma Degree Postgraduate

Year when you first enrolled in the Programme: _____

CROSS CREDITS

Have you been granted cross credits for any course towards this Programme? Yes No

Tick Yes or No.

If Yes, please write the number of cross credits, programme for which cross credits were given, and the institution where you studied that programme.

No. of cross credits _____ Institution _____ Programme _____

Note: If you have not applied for cross credits, please do so now and attach your completed application form for cross credits to this form.

CURRENT COURSES

List courses you are currently registered in:

_____ / _____ / _____ / _____ / _____ / _____

GRADUATION CEREMONY

Please tick one of the following:

- I will collect my certificate at the graduation ceremony which I will attend.
- I will not attend the graduation ceremony. I request that my certificate be sent to me after the graduation ceremony to the address above.

Applicant's Signature: _____

Date: _____

When you have completed this form, please send it to:

Student Academic Services
The University of Fiji
Private Mail Bag
Saweni
Lautoka