

## **GRADUATION APPLICATION**

PERSONAL INFORMATION				
Student Name				
Date of Birth (MM/DD/YYYY)				
Student UPAS ID				
ADDRESS FOR CORRESPO	NDFNCF			
Address	NO LINGE			
City		Postal Code		
State		Country		
Email ID		Contact Number		
PROGRAM INFORMATION	l			
Program Name				
Date of Enrollment (MM/DD/YYYY)				
Last Term Enrolled	Spring / Summer / Fall	Year		
Total Number of Credits Completed @ UPAS		Total Number of Credits Transferred		
Capstone Title		,		
Internship Duration				
CUM GPA Earned @ Graduation				
STUDENT DECLARATION				
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Student Signature	sapport of my canadactive me	.,vandace my up	Date	



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## **Only for Office Use**

GRADU	JATION REQUIREMENT				
S. No	Require	ments	Yes	No	Remarks (if any)
1	Satisfactory completion of 36 credit hours in the chosen field of study				
2	Capstone project approved by University Faculty Committee				
3	10-week supervised internship completed, and internship report submitted and evaluated by faculty				
4	Minimum 70% of the credits taken from UPAS				
5	Cumulative GPA 3.0 or higher				
6	Completed the degree program within 3 years from the date of enrolment				
7	Fees dues to university				
_	JATION				
	to Graduate: 🗆 Yes 🗆 No				
Accountant Date:		nief Academic Officer	Reg Da	 gistrar te:	