

GRADUATION APPLICATION

PERSONAL INFORMATION	N			
Student Name				
Date of Birth (MM/DD/YYYY)				
Student UPAS ID				
ADDRESS FOR CORRESPO	NDENCE			
Address				
City		Postal Code		
State		Country		
Email ID		Contact Number		
PROGRAM INFORMATION	V			
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				
I declare the above inform	nation is true, correct and com support of my candidature ma			alse or incomplete
Student Signature			Date	



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Only for Office Use

GRADUATION REQUIREMENT							
S. No	Requireme	nts	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 wit of enrolment	hin 3 years from the date					
7	Fees dues to university						
GRADU	IATION!						
Eligible	to Graduate:						
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Accoun	tant Chief Date:	Academic Officer	Reg Dat	gistrar te:			