

Registrar's Office Fredericton NB E3B 5G3 Tel: 506-452-0530 Fax: 506-452-7706 registrarsoffice@stu.ca

Application for BSW and BED Graduation

Student ID Number:					
<u>Note: The nam</u>	<u>e you give here w</u>	vill be printed	on your	diploma. Please print clearly	, <u>-</u>
First Name	Middle	Middle Name		Last Name	
Home Town (to be printed	J			and Province)	
Mailing Address: (diploma				eremony and live outside Fredericton):	
		Province	::	Postal Code:	
Telephone:		Email ad 	dress:		
Previous Degree (s) (to b	e printed on the g	graduation pro	gramme	only)	
Degree(s) (ex. BA)		Year(s)		_Institution(s)	
Application Fee \$50					
I plan to attend the grade	ation ceremony	□ Yes	□ No		
DEGREE PROGRAMMES	<u>8:</u>				
□ Bachelor of Social Wo	ork (BSW)				
□ Bachelor of Education	n (BEd)				
Date:	Signature:				