UNM | Graduate Studies

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Additions: _____
Deletions: _____
Page #: _____

Proposed Graduation List

Department: _____ Semester: _____ Date: _____

Graduate Chair: _____ Phone: _____ Email: _____

Dept. Adv/Adm.: _____ Phone: _____ Email: _____

Student (Last Name, First Name)	**UNM ID#**	**Degree & Major Code Sought** List (see forms page)	**Plan I or II or III**	**Concentrations**	**Courtesy Policy (Y/N)**	**Approved Transcripted Minor/Cert**

Graduate Director _____ Date _____ Department Chair _____ Date _____