GRADUATE STUDIES

THE UNIVERSITY OF NEW MEXICO
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PROPOSED GRADUATION LIST

DEPARTMENT _____ GRADUATION SEMESTER: _____

FORM SUBMITTER _____ PHONE _____ EMAIL _____

If this form is being submitted to ammend a previously submitted graduation list, please ensure that all previously submitted names are listed and that any additions or deletions are indicated in the right-most column (+/-).

UNM ID#	STUDENT NAME (LAST NAME, FIRST NAME)	DEGREE NAME	DEGREE TYPE	SELECT PLAN I, II OR III (MASTER'S)	CONCENTRATIONS (IF APPLICABLE)	COURTESY	+/-
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	
				N/A		No	

MASTERS ENROUTE Are there any students who are pursuing a masters enroute? If so, please list their names: