

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