



NORTHERN  
ARIZONA  
UNIVERSITY

**Office of the Registrar**  
**GRADUATION ADDENDUM**

(Change(s) to Undergraduate Application for Graduation)

STUDENT NAME \_\_\_\_\_ NAU I.D.# \_\_\_\_\_

DEGREE (BA, BS) \_\_\_\_\_

PLAN/MAJOR \_\_\_\_\_

CURRENT TERM OF GRADUATION \_\_\_\_\_, 20\_\_\_\_

**DELETE** the following graduation requirement(s) from the Application for Graduation:

College/Univ	Subject & Catalog #	Units/Hrs	Term/Year	*
**				

- \* If Applicable, Specify I, IP, R, or C:
- \* I = Incomplete from previous terms
- \* IP = In-Progress from previous terms
- \* R = Repeat of previous course
- \* C = Minimum grade of "C" required

(Courses being taken by audit are not counted in GPA or total hours)

\*\* Specify any pending petitions/waivers

**ADD** the following graduation requirement(s) to the Application for Graduation:

College/Univ	Subject & Catalog #	Units/Hrs	Term/Year	*

**CHANGE** Graduation date to:  Fall  Winter  Spring  Summer Year: 20\_\_\_\_\_

VERIFICATION SIGNATURES: By signing, we certify that upon successful completion of the above listed courses, the student's degree requirements will be satisfied.

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

MAJOR ADVISER'S SIGN./DATE \_\_\_\_\_ DEPT. CHAIR'S SIGN. \_\_\_\_\_ DEAN'S SIGN. \_\_\_\_\_

MINOR ADVISER'S SIGN./DATE \_\_\_\_\_ MINOR/CERT ADVISER'S SIGN./DATE \_\_\_\_\_ HONORS ADVISER'S SIGN./DATE \_\_\_\_\_

**UNDERGRADUATE ADDENDUMS: Forward completed addendum to the Registrar's Office, Box 4103 or fax to 928-523-2332**

FOR REGISTRAR'S OFFICE USE ONLY

Date of Review: \_\_\_\_\_ Processed By: \_\_\_\_\_ Reg. Ofc. Approval: \_\_\_\_\_

REV 03//05