



Graduation Date Change Form Bachelor's Degree

Mail to: UNC Pembroke
Office of the Registrar
P.O. Box 1510
Pembroke, NC 28372
-OR-
Fax: 910-521-6328

(Please print clearly using **BLACK INK** only)

UNCP ID:

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OFFICE USE ONLY:
Date Processed:

Last _____ | **First** _____ | **Middle** _____

Please move my graduation date **FROM:** _____ / _____, **TO :** _____ / _____
Term Year Term Year

Major: _____ Concentration: _____

DIPLOMA MAILING ADDRESS (Please use an address that will be valid for several months after the end of your graduating term. Diplomas will be mailed 8 to 10 weeks after final grades are received.)	Street Address or P.O. Box	
	City	State/Zip

SIGNATURE OF APPLICANT: _____ **Date:** _____