



Registrar's Office  
Fredericton NB E3B 5G3  
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Fax: 506-452-7706  
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Application for BSW and BED Graduation

Student ID Number : \_\_\_\_\_

Note: The name you give here will be printed on your diploma . Please print clearly.

First Name

Middle Name

Last Name

Home Town (to be printed in the graduation programme) : (City and Province)

Mailing Address : (diploma will be mailed to this address if you do not attend the ceremony and live outside Fredericton) :

Province : \_\_\_\_\_