



**THE UNIVERSITY OF THE WEST INDIES
CAVE HILL CAMPUS
FACULTY OF SCIENCE AND TECHNOLOGY**



COMPLETION AND GRADUATION CONFIRMATION FORM

(Faculty of Science and Technology Students Only)

INSTRUCTIONS

This form must be completed in **BLOCK CAPITALS** and submitted to the Dean, Faculty of Science and Technology before the course add/drop deadline at the start of each Semester.

TO BE COMPLETED BY STUDENT AND EMAILED TO fst@cavehill.uwi.edu

ACADEMIC YEAR: _____ SEMESTER: _____

NAME OF STUDENT: **LAST NAME** **FIRST NAME** **MIDDLE NAME**

I.D. #: _____ EMAIL: _____

LEVEL: Level I [] Level II [] Level III []

I INTEND TO GRADUATE AT THE END OF: SEMESTER I [] SEMESTER II [] SUMMER []

WITH MAJOR(S) IN: _____

AND/OR MINOR(S) IN _____

THE PETITION IS BASED ON HAVING ATTAINED THE FOLLOWING CREDITS AS SET OUT BELOW:

LEVEL I		LEVEL II		LEVEL III	
COURSE CODE	CREDITS	COURSE CODE	CREDITS	COURSE CODE	CREDITS
TOTAL CREDITS		TOTAL CREDITS		TOTAL CREDITS	

FOUNDATION COURSES:

COURSE CODE			
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FOREIGN LANGUAGE REQUIREMENT: _____

CURRENT REGISTRATION

LEVEL I		LEVEL II		LEVEL III	
COURSE CODE	CREDITS	COURSE CODE	CREDITS	COURSE CODE	CREDITS
TOTAL CREDITS		TOTAL CREDITS		TOTAL CREDITS	

SIGNATURE OF STUDENT: _____

DATE: _____