



APPLICATION FOR GRADUATION

Last Name: _____ First Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

Applying for graduation from:

- _____ Therapeutic Bodywork Practitioner
- _____ Holistic Doula Practitioner
- _____ Natural Health Educator (1st year Naturopathic Program)
- _____ Natural Health Therapist (2nd year Naturopathic Program)
- _____ Natural Health Practitioner (3rd year Naturopathic Program)
- _____ Certified Naturopath (4th year Naturopathic Program)

Write in class name, the date you attended, and whether homework was completed:

Class Name in Full	Date	Directed Study Complete?
Final Exam		N/A



What is the status of your research paper? _____

Graduation Information

Graduation Ceremony Attendance: Y / N Date of Ceremony: _____

If attending, I plan to have _____ guests in attendance.

Height: _____ (for the graduation gown).

Diploma: I would like my name to read as follows on my diploma (please print clearly):

I swear that I have paid all fees and charges, including extension fees for late homework and retake fees, and that I have no charges due at **herbs etc.**

Student Name

Date

Student Signature

Date