

Accredited by the Western Association of Schools and Colleges (WASC)

NATIONAL CAMPUS PO. Box 159 Palikir, Pohnpei, FSM 96941 Phone: (691) 320-2480 POHNPEI CAMPUS P.O. Box 614 Kolonia, Pohnpei, FSM 96941 Phone: (691) 320-3795

CHUUK CAMPUS P.O. Box 879 Weno, Chuuk, FSM 96942 Phone: (691) 330-2689 KOSRAE CAMPUS P.O. Box 37 Tofol, Kosrae, FSM 96944 Phone: (691) 370-3191

YAP CAMPUS P.O. Box 286 Colonia, Yap, FSM 96943 Phone: (691) 350-2296 FSM FMI P.O. Box 1056 Colonia, Yap, FSM 96943 Phone: 350-5244

ADDITION FOR CRADITATION

AFFLICATION FOR GRADUATION			
Name (Last Name, First Name, Middle Name)	2 Date		
3 Address (P.O. Box, Street, City, State, Country, ZIP Code)	4 Date of Birth (MM/DD/YYYY)		5 Sex Male Female
6 State of Origin 7 Social Security Number	8 Phone Number 9 E-Mail Address		9 E-Mail Address
I HEREBY MAKE APPLICATION FOR THE			
Associate of Arts Associate of Science Associate of Applied Science 3rd Certificate of Achievement			
Certificate of Achievement			
Major/Area of Specialization (Donotabbreviate)			
10 Lexpect to graduate by the end of 11 Student (Signature over printed name)			
Spring Summer Fall Year			Date
FOR ADMISSIONS AND RECORDS USE ONLY The above named student is recommended			
Associate of Arts Associate of Applied Science Certificate of Achievement			
Associate of Science 3rd Certificate of Achievement			
Degree or Certificate to be conferred		Date to be	conferred (MM/DD/YYYY)
RECOMMENDED for the A.A., A.S., A.A.S. Degree/Certificate of Achievement upon successful completion of the following requirements:	Registrar, Admission	ns and Records	
			Date
	Coordinator, Admissions and Records		
			Date
	L		Form No.6 (Rev. 1/3/2005