

## LIST OF POTENTIAL OCTOBER GRADUATES

<u>Degree</u>

Name of Student

PRINT in alpha order	Indicate DEGREE and PROGRAM
DEPARTMENT	
FROM	Phone #
5. Keep a copy of this list and any revisions.	
4. Additions or Deletions to your original lis <a href="mailto:klhess@uvm.edu">klhess@uvm.edu</a>	st must be sent to this Office in writing, or e-mail to:
3. If there are no graduates for this period -	- specify NONE and return this form.
`	Students are requested to submit copies of their llege – If you prefer to make copies and collect fees,
1. List the names of the Graduate Students w October.	who may receive their Master's or Doctoral degree in
RETURN TO: GRADUATE COLLEGE - V	WATERMAN, ROOM 330
DUE DATE: AUGUST 1	

<u>Program</u>

 $(\sqrt{})$  if Non-Thesis