

GRADUATION INFORMATION SHEET

Only write on this form information about yourself that may be read to the entire audience while you walk across the stage to receive your "diploma"!!!! Please be certain to write something!!!!

Full Name (Please print): _____

Hometown and State: _____

Degree: **PED-Exercise Science** **PED-Teaching Certification**
 Parks & Rec Mgt **Community Health Education**
 Recreation Therapy **Athletic Training**
 Gerontology Minor **Gerontology, Master's(MALS)**

Student Teaching Site: _____

Fieldwork/Practicum Site/s: _____

Internship Site: _____

Awards/Special Recognitions: _____

Professional Activities/Affiliations (e.g. AAHPERD, NCAHPERD, NCRTA, NCRPA, PEM, RMA) _____

University Activities/Involvement: _____

Community Activities/Involvement: _____

Graduate School Plans? _____

Career/Job Opportunities? _____

E-mail address (personal, not UNCW's) _____

Permanent Mailing Address: _____

Please return this completed form to Laura McHale in the HAHS office (Trask 156) no later than Wednesday, November 25th.

IF you do NOT plan to attend the departmental ceremony, please notify mchalel@uncw.edu