



DEGREE PROGRAM DECLARATION FORM

UoNA Student ID#	Student's Full Name (please print)	Program Start Date
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I acknowledge my enrollment in the following degree program (only one program may be selected):

Master's Programs

<input type="checkbox"/> Master of Business Administration (MBA)	<input type="checkbox"/> Master of Science in Computer Science (MSCS)	<input type="checkbox"/> Master of Science in Information Technology (MSIT)
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Bachelor's Programs

<input type="checkbox"/> Bachelor of Science in Business Administration (BSBA)	<input type="checkbox"/> Bachelor of Science in Information Technology (BSIT)
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Student Signature:

Date:

Academic Department Personnel Signature:

-----For Administrative Use Only-----

Return signed and completed form to the VP of Educational Operations for final review.

Date of Review

VP's Initials

Reviewed form should be routed to student records and placed in the student file.

Date placed in file

Staff member's initials