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|  | **Graduation Certification** |

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| **Certification Details** |

This Graduation Certification relates to the attached list of students dated [insert date].   
**Note:** the person giving this certification is required to initial each page of the attached list.

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| **Certification of Graduation List** |

**I confirm that I have satisfied myself that the following requirements have been met in respect of each student named in the attached list:**

1. the student has met the course rules and other course requirements to graduate;
2. the student does not owe a financial debt to the University, other than a debt that the University has agreed may be repaid after graduation;
3. the student has no unresolved disciplinary cases or appeals;
4. the student is not subject to a current exclusion or expulsion from the University; and
5. all University property that the student is required to return, has been returned.

**For each student named in the attached list, I confirm that the student’s proposed graduation has been endorsed by** *[tick one of the following]* **:**

Graduate Research Examinations Board, for higher degree research students; **or**

Curriculum Committee of Academic Board for students other than higher degree research students and confirmed by the Executive Principal Student Experience.

**In order to certify the above matters, I have made such enquiries and obtained such assurances as a prudent person in my position would make. I am relying on the accuracy of the information given to me, acknowledging that I am the senior executive accountable for this graduation list.**

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| **Notification, Record Keeping, and Approval** |

**I will ensure:**

1. The University’s designated Graduation Officer is provided with a signed copy of this Graduation Certification and attached list;
2. This Graduation Certification and attached list, once signed, is:
   1. stored in the appropriate container in the University’s corporate records management system; and
   2. submitted for noting by the University Council.

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| **Signature:** |  |
| **Name:** |  |
| **Position:** Choose an item. | **Date:** Click or tap to enter a date. |

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|  | **Graduation Certification**  **Executive Principal, Student Experience**  **Faculty Associate Dean, Teaching and Learning** |

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| **Faculty Associate Dean, Teaching and Learning** |

**I confirm that I have satisfied myself that the following requirements have been met in respect of each coursework student named in the attached list:**

1. I have provided the Deputy Vice-Chancellor all information that I believe they require in order to assess the eligibility of each coursework student in the attached list;
2. The Student Experience portfolio has appropriate processes in place to comply with all relevant University policies, guidelines, and processes intended to ensure the coursework students named in the attached list are eligible to graduate.

**In order to certify the above matters, I have made such enquiries and obtained such assurances as a prudent person in my position would make. I am relying on the accuracy of the information given to me.**

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| **Signature:** |  |
| **Name:** |  |
| **Associate Dean, Teaching and Learning**  **Faculty of** Choose an item. | **Date:** Click or tap to enter a date. |

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| **Executive Principal, Student Experience** |

**I confirm that I have satisfied myself that the following requirements have been met in respect of each student named in the attached list:**

1. the student has met the course rules and other course requirements to graduate;
2. the student does not owe a financial debt to the University, other than a debt that the University has agreed may be repaid after graduation;
3. the student has no unresolved disciplinary cases or appeals;
4. the student is not subject to a current exclusion or expulsion from the University; and
5. all University property that the student is required to return, has been returned.

**I confirm I have provided the Deputy Vice-Chancellor and/or Deputy Vice-Chancellor Research any information they require in order to be satisfied of the eligibility of each student in the attached list.**

**I confirm I have satisfied myself that the Student Experience Division, Schools and Faculties have followed all required processes to confirm this list of proposed graduands.**

**I have made such enquiries and obtained such assurances as a prudent person in my position would make and, in relying on the accuracy of the information provided to me, certify that the Students listed are eligible to graduate.**

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| **Signature:** |  |
| **Name:** |  |
| **Executive Principal, Student Experience** | **Date:** Click or tap to enter a date. |