University of the Virgin Islands
Access and Enrollment Services
Replacement Degree Application

INSTRUCTIONS: Please print or type this form. One application form per degree.

Print legal name:_____
First Middle Last

ID#_____ Gender M☐ F☐ Date of Birth _____/_____/_____
MM DD YYYY

Current Mailing Address:

_____
P.O. Box/Street Address

_____
City State Zip Code

_____
Telephone# (Daytime)

Email Address: _____

INDICATE DEGREE RECEIVED

☐ Master of Arts in Business Administration

☐ Master of Arts in Mathematics for Secondary Teachers

☐ Master of Arts in Education

☐ Master of Arts in Psychology

☐ Master of Marine and Environmental Sciences

☐ Master of Arts in Public Administration

☐ Bachelor of Science Major(s)_____

☐ Bachelor of Arts Major(s)_____

☐ Associate of Science Major(s)_____

☐ Associate of Arts Major(s)_____

CAMPUS

☐ St. Thomas ☐ St. Croix

FEES: [All fees are non-refundable]

- Replacement Degree $25.00

Date:_____ Student's Signature:_____

All completed applications must be submitted to the Office of the Registrar on St. Thomas Campus.

Mailing
Access and Enrollment Services, Office of the Registrar, #2 John Brewers Bay, St. Thomas, VI 00802

Fax
(340) 693-1167