

# GRADUATION REGISTER



## Grace Hmong Alliance Church

14665 W Lisbon Rd., Brookfield, WI 53005  
(414) 643-5272 \* ghalliance1@yahoo.com  
www.ghalliance.org

Date:

Student's Name:

Address:

City, State:

Zip/Postal Code:

Phone Number

Email  Parents' Name

### Check One:

- High School       AA       BS/BA       Master       Doctor

Other-specific

Major

School Name

Future Goal

Your Signature  Current date:

Please print and take to the Church officer.