

Application for Graduation

Review your transcript/degree audit with your Advisor and if you are within 6 credits from program completion, submit completed application to Anne Donahue.

Please print your name clearly as it should appear on your diploma

Last Name: _____ First Name: _____ M.I.: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Phone Number: _____

Cell phone carrier: US Cellular Verizon AT & T Tracfone Other _____ Text Updates: Yes No

Student ID #: _____ Personal email address: _____

Advisor: _____

Program of Study: _____ Associate Degree Diploma Certificate

_____ Associate Degree Diploma Certificate

Month you plan to graduate (please choose one) December May Veteran of the US Armed Forces Yes No

Do you plan to attend graduation exercises in May? Yes No

Will you be returning to WCCC for an additional program after graduation? Yes No

If yes, what program(s)? _____

Are you planning to continue your education? Yes No

If yes, what College are you transferring to? _____

Have you been accepted? Yes No Are you currently registered for courses? Yes No

What is your chosen program of study? _____

Do not submit this form without your Advisor's signature.

Applicable graduation fee of \$75.00 will be applied during your last semester of attendance.

To ensure delivery of your official diploma, please verify that your correct mailing address following graduation is on file.

Student Signature: _____ Date _____

Advisor Signature: _____ Date _____

For Office Use Only

Coordinator of Enrollment & Student Services: _____ Date _____

Courses missing: _____

Non-Discrimination Policy: *Washington County Community College is an equal opportunity/affirmative action institution and employer.*

For more information; please call Tatiana Osmond, Affirmative Action Officer, at 454-1094.