



APPLICATION FOR GRADUATION

****\$15.00 for each (additional cost \$18.00 for mailing)****
(FEES ARE NON-REFUNDABLE)

Name: _____
LAST FIRST MI

SSN/GCC ID NUMBER: _____

DATE OF BIRTH: _____

If you have used another name at GCC, list here _____

MAILING ADDRESS: _____
P.O. Box OR Home Mailing Address

GENDER: ☐ MALE ☐ FEMALE

Village Territory/ State ZIP Code

TELEPHONE: _____

I am meeting or have met the requirements for: ☐ Associate Degree ☐ Certificate ☐ Adult High School ☐ Vocational High School

If Degree or Certificate, what program: _____

Example: *ACCOUNTING, COMPUTER SCIENCE, COSMETOLOGY, etc.*

****I AM APPLYING UNDER THE REQUIREMENTS AS STATED IN THE GCC _____ Catalog edition.**

****I EXPECT TO MEET ALL REQUIREMENTS AND GRADUATE ON _____**
SEMESTER/YEAR

My legal name should appear on my degree or certificate exactly as follows:

(PRINT YOUR LEGAL NAME)

☐ I DO NOT WISH ☐ I DO WISH TO PARTICIPATE IN THE GRADUATION CEREMONY TO BE HELD IN MAY.

Please answer the following **carefully** and as completely as you can. Your answers will help to reconstruct and/ or verify your records.

I have attended: ☐ College Program from 20_____ to Present

☐ Adult High School Program from 20_____ to Present

GCC should have received transcripts of my work from the following institution(s): _____

STUDENT SIGNATURE

DATE

FOR ADMISSIONS & REGISTRATION/ BUSINESS OFFICE USE ONLY

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Does this student have an outstanding obligation to the College? ☐ No ☐ Yes _____

Number of Degree/ Certificate/ Diplomas ordered: _____ Amount Paid: _____ Receipt #: _____ Cashier: _____ Date: _____

FOR ADMISSIONS & REGISTRATION OFFICE USE ONLY

CURRENT SEMESTER COURSE(S): _____

RECOMMENDED FOR GRADUATION:

HONORS: ___ Yes _____ ___ No

DIPLOMA ORDERED:

___ Yes _____
Graduation Date Program

___ Yes _____ ___ No
Date

___ No Comments: _____