

Registrar's Approval: _____

Date:

APPLICATION FOR GRADUATION

Date: _____

Student A#		_	
Name			
T 1		name as you wish it to appear on	-
Address			
City		State	Zip Code
Telephone Number			
Email Address			
Degree (Check one)		□ Associate of Applied Sci □ Associate of General Stu	
Curriculum	4	Curriculum requi	irements in the current catalog will
Year of WCCCD Catalog (<i>Catalog year must be with</i> Do you have any waivers Are you a member of the (<i>If yes, please attach a copy</i> Are credits from institutio curriculum? (Check one) If yes, from what institution When will you complete	<i>vin a 2 year period</i>). or credit for experience applicance Phi Theta Kappa Internationance <i>of your induction letter or mem</i> ons (other than Wayne County □ Yes □ No on? 1) 2) 3) requirements? (Check one and the provided to be prov	Curriculum is found on page ations on file? I Honor Society <i>ibership card</i>) 7 Community College District) b	peing used toward partial completion of the
		Signature	e of Applicant
(Please refer to the curren	t academic class schedule for a	ç	the Campus Records/Registration Office).
		ling to the above curriculum inf	
concerned this studen			
Signature of Advisor, or P	rogram Director/Head	Date	
		e i	are not completed in the re, the student must submit