Gogebic Community College

Application For Graduation

Students applying for graduation must complete and submit an Application for Graduation form to be eligible for graduation.

<u>Please Print</u>

Name _____
                (Last)   (First)   (Middle)

Address _____
                (Street)   (City)   (State)   (Zip Code)

Social Security Number _____

Student I.D. Number _____

Date you expect to receive degree _____

If one year Certificate, please indicate Program:

_____
(i.e. Practical Nursing, Cosmetology, Welding, etc.)

If two year Program, please check the Degree applying for:

☐ Associate of Arts   ☐ Associate of Applied Business

☐ Associate of Science   ☐ Associate of Applied Technology

☐ Associate of Applied Science

List Program you are enrolled in

_____
(i.e. General Ed, Psychology, Accounting, Data Processing, etc.)

Print your name EXACTLY as you wish it to appear on your Diploma:

_____
        (First)   (Middle)   (Last)

MACRAO agreement satisfied   _____

MTA agreement satisfied   _____