

Graduation Application

Instructions: (1) Enter Student ID and name, (2) Complete questions 1-4, (3) Sign and date application, and (4) Submit completed application to your Academic Advisor, Program Director, Department Head or Academic Dean.

Student ID:

T									
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Last Name	First Name	Middle Name
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Names will appear on the commencement program and on credentials as listed in our Student Information System. To ensure that your name is correct, please log into eTC and verify your name in the top left corner after "Welcome." If there are any changes concerning your name, it is your responsibility to submit the appropriate documentation to TC Central, 180 Miller Hall, by the Graduation Application deadline date. **Graduation application deadlines are listed on the Academic Calendar.**

1. Expected completion of program Spring Summer Fall
 Year 20 _____

2. I am applying for (check one) Associate Diploma Certificate
 Major _____

You are required to complete a Graduation Application for each credential you will be receiving. Should a problem arise with your plan to graduate, we will contact you through your eTC email account.

3. Will you be participating in the commencement ceremony?
 Yes No

If participating, provide Height _____ Weight _____.

4. Do you have additional credits to be transferred from another institution before graduation? Yes No

If yes, from what institution(s): _____

If yes, what course(s): _____

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The College provides academic regalia (cap/gown) for students participating in the commencement ceremony. A postcard will be mailed to your mailing address along with an email to your eTC email address informing you of the academic regalia pick-up date. If not participating, your associate degree, diploma, or certificate cannot be picked up; it will be mailed to you within a week of the ceremony.

By my signature below:

I understand that the associate degree, diploma or certificate will not be awarded until I successfully complete all program requirements, achieve at least a 2.00 GPA in the program of study, and pay all financial obligations owed to the College. I also understand I must have earned a minimum of 25% of the credit hours required for a degree, diploma, or certificate through courses taken at the College. My signature below indicates my understanding of this information.

I understand that if I had a student loan while attending TCTC, I will be contacted from someone in the Financial Aid Office for further exit counseling requirements that must be met prior to graduation.

Student's Signature _____ Date: _____

Advisor, Program Director, Department Head, or Academic Dean

I find the above student eligible for graduation, provided the course(s) listed on Degree Works are successfully completed.

Important Note: Students who are graduating in either Associate in Arts or Associate in Science; return for appropriate signature to the Division Office, Oconee Hall.

Signature _____ Date: _____

Signature _____ Date: _____

Catalog Term: _____

(Attach copy of Degree Works. Course substitutions/revalidations, with all appropriate signatures, should be attached if applicable.)

10/16 **Student Data Center/Registrar's Office Use Only**

SHADEGR SHACATT

Date Keyed: _____ Initials: _____

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