

# Martin Community College

## Application for Graduation

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_  
(Please print your legal name as it appears on your birth certificate.)

Address: \_\_\_\_\_  
(Street/PO Box) (City, State, Postal Code)

Cell phone: ( ) \_\_\_\_\_ Personal Email Address: \_\_\_\_\_

Do you plan to participate in the graduation commencement held in May?  Yes  No  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Are you a current high school student?

### Fall, Summer Graduates & Spring Graduates not attending graduation, how will you obtain your accolade?

I will pick up with cover Please mail without cover Please mail with cover. I will pay the  
\$5 for a max of 3 credentials postage fee of \$9 (1), \$10 (2) covers

Initial to deny permission for your name; degree program; and GPA (only if receiving an award) to be printed in the commencement program, newspaper, and/or announced.

- APPLICATION SUBMISSION DOES NOT GUARANTEE ALL GRADUATION REQUIREMENTS HAVE BEEN MET.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### \*\* MUST BE COMPLETED BY THE ADVISOR \*\*

First Degree	_____	<input type="checkbox"/> AAS	<input type="checkbox"/> A.G.E.	<input type="checkbox"/> Dipl.	<input type="checkbox"/> Cert.	<input type="checkbox"/> AA	<input type="checkbox"/> AS
	<small>Name of Program Program Code</small>						
Second Degree	_____	<input type="checkbox"/> AAS	<input type="checkbox"/> A.G.E.	<input type="checkbox"/> Dipl.	<input type="checkbox"/> Cert.	<input type="checkbox"/> AA	<input type="checkbox"/> AS
	<small>Name of Program Program Code</small>						
Third Degree	_____	<input type="checkbox"/> AAS	<input type="checkbox"/> A.G.E.	<input type="checkbox"/> Dipl.	<input type="checkbox"/> Cert.	<input type="checkbox"/> AA	<input type="checkbox"/> AS
	<small>Name of Program Program Code</small>						
Fourth Degree	_____	<input type="checkbox"/> AAS	<input type="checkbox"/> A.G.E.	<input type="checkbox"/> Dipl.	<input type="checkbox"/> Cert.	<input type="checkbox"/> AA	<input type="checkbox"/> AS
	<small>Name of Program Program Code</small>						

Graduation Term:  Spring  Summer  Fall Year \_\_\_\_\_

PLEASE ATTACH A CURRENT EVALUATION FOR EACH DEGREE, DIPLOMA, AND/OR CERTIFICATE REQUESTED.

ADVISOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### \*\* MUST BE COMPLETED BY THE BUSINESS / REGISTRAR'S OFFICE \*\*

GRADUATION FEES ARE NON-REFUNDABLE \* GRADUATION FEES ARE FOR A GIVEN COMMENCEMENT

<input type="checkbox"/> \$30 – FIRST DEGREE, DIPLOMA, AND/OR CERTIFICATE	AMOUNT PAID: \$
<input type="checkbox"/> \$5 – SECOND DEGREE, DIPLOMA, AND/OR CERTIFICATE	DATE PAID:
<input type="checkbox"/> \$5 – ADDITIONAL JACKET	RECEIPT NO#:
<input type="checkbox"/> \$5 – ADDITIONAL TASSEL	
<b>TOTAL AMOUNT PAID</b>	

PERC	GPA	
CRI	HONORS	
IASU	PRIVACY	
EVAL	COMPLETED	

GRADUATE'S RESPONSIBILITY: ONE WEEK BEFORE THE GRADUATION COMMENCEMENT: TICKETS, CAPS & GOWNS MUST BE PICKED UP.

RECEIVED BY: \_\_\_\_\_