

Degree/Diploma Request Section (To be completed by student)

✓ It is my belief that I will have completed the requirements for graduation from the program for which I am enrolled at the end of: (please check one and fill in year)

Fall Semester Spring Semester Summer Term Year _____

✓ This is to certify my intention to graduate. I will be receiving: (please check **one**)

****If you are completing more than one degree/diploma, please submit a separate form for each one.**

- Associate of Arts
- Associate of Applied Science
Program Name _____
- Associate of Science
- Diploma
Program Name _____
- Certificate Name _____

✓ I would like my name to appear on my degree/diploma exactly as follows:

PLEASE PRINT: _____
First Middle Name or Initial Last

****Please provide the phonetic spelling of your name for graduation:** _____

Full Address _____
House Number & Street City State Zip Code

Email _____

Home Phone _____ **Cell Phone** _____

Signature _____ **Date** _____ **Student ID** _____

Evaluation Section (To be completed by Registrar)

- If you satisfactorily complete **ALL** of the classes in which you are enrolled as of this date, you will meet the degree/diploma requirements specified above.
- If you satisfactorily complete **ALL** of the classes in which you are enrolled as of this date, you will only have the remaining requirements (indicated below) to complete by the end of one of the summer sessions.
- You are not eligible to graduate at the end of the _____ term. The reason(s) are indicated below:

Specific category not satisfied: <ul style="list-style-type: none"> <input type="checkbox"/> Communications _____ <input type="checkbox"/> Humanities _____ <input type="checkbox"/> Social Science _____ <input type="checkbox"/> Math/Science _____ <input type="checkbox"/> Cultural Awareness _____ <input type="checkbox"/> Still need to complete _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Insufficient Number of Semester Hours Number Short _____ <input type="checkbox"/> Insufficient Grade Point Average Current GPA _____ <input type="checkbox"/> 15 of the last 20 semester hours not earned through SCC
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If you are currently enrolled or plan to enroll in the near future to correct any deficiencies noted above, please notify the Registrar's Office to insure that your transcript can be re-evaluated at the end of that period.

Please note that you are still eligible to participate in commencement exercises to be held in May if you are planning to complete your degree/diploma by the end of the summer session.

Signature _____ Date _____

REGISTRAR USE ONLY: Date Ordered _____ Date Awarded _____ Date Mailed _____
 PTK Did not meet degree/diploma requirements