

**Application as Candidate for Graduation**  
SUMMER 2024 - Application Due by July 1<sup>st</sup>, 2024

**Print your name as you want it to appear on your diploma (*Please print clearly*)**

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name or Initial \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Permanent Phone (\_\_\_\_\_) \_\_\_\_\_ Student ID or SS# \_\_\_\_\_

**Shawnee Community College has only one Graduation Ceremony, which is in May. Do you plan to walk in the ceremony?** Yes No

Degrees

- \_\_\_\_ Associate of Arts
- \_\_\_\_ Associate of General Studies
- \_\_\_\_ Associate of Science
- \_\_\_\_ Accounting
- \_\_\_\_ Agriculture Business & Management
- \_\_\_\_ Associate Degree Nursing
- \_\_\_\_ Automotive Technology
- \_\_\_\_ Business Management
- \_\_\_\_ Computer Systems & Security Specialist
- \_\_\_\_ Construction Management
- \_\_\_\_ Criminal Justice
- \_\_\_\_ Fish & Wildlife Management
- \_\_\_\_ Heating/Ventilation/AC/Refrigeration
- \_\_\_\_ Medical Laboratory Tech
- \_\_\_\_ Occupational Therapy Assist
- \_\_\_\_ Social Work

One Year Certificates

- \_\_\_\_ Agriculture
- \_\_\_\_ Automotive Tech Assistant
- \_\_\_\_ Combination Welding
- \_\_\_\_ Cosmetology
- \_\_\_\_ Criminal Justice
- \_\_\_\_ General Education Core
- \_\_\_\_ Medical Assistant
- \_\_\_\_ Medical Coding Specialist
- \_\_\_\_ Medical Office Assistant
- \_\_\_\_ Practical Nursing

Less Than One Year Certificates

- \_\_\_\_ Auto Body
- \_\_\_\_ Auto Maintenance/Light Repair
- \_\_\_\_ Basic Heating/Air Conditioning
- \_\_\_\_ Basic Residential Electricity
- \_\_\_\_ Cosmetology Instructor Training
- \_\_\_\_ Medical Biller
- \_\_\_\_ Medical Coder
- \_\_\_\_ Nail Technology
- \_\_\_\_ Phlebotomy

**You must present this form to the Registrar's Office (H2085) to ensure that your high school or GED transcript/diploma is on file.**

\_\_\_\_\_ (*Registrar's Office Verification*)

**YOU WILL NOT RECEIVE A DEGREE UNLESS THIS FORM IS COMPLETED AND TURNED IN TO THE REGISTRAR'S OFFICE (H2085) BY THE DUE DATE.**

Any application received after the due date will be included with the following semester graduates. Applications will not be accepted unless the above steps have been completed and have initials clearing that student for graduation.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date Submitted

**\*Anyone in need of disability accommodations for the commencement ceremony please contact Jackie Smith.\***

SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ID#: \_\_\_\_\_

Name: \_\_\_\_\_

Degree Title/Number: \_\_\_\_\_

# (Advisor -- Please list all courses)

**Deficiencies:**

FALL \_\_\_\_\_:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Roll to next semester
- Remove from list
- Cleared for Graduation

SPRING \_\_\_\_\_:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Roll to next semester
- Remove from list
- Cleared for Graduation

SUMMER \_\_\_\_\_:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Roll to next semester
- Remove from list
- Cleared for Graduation

GPA: \_\_\_\_\_  Honors Delinquent Charge: \_\_\_\_\_

Total Hours: \_\_\_\_\_ Degree: \_\_\_\_\_

Cleared for Graduation: \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Registrar's Signature: \_\_\_\_\_ Date: \_\_\_\_\_