Application for Graduation

Please complete the entire form, save a copy for your records, and email the form to records@gtcc.edu. Submit one application for each award requested. You must complete all requirements pertaining to your degree program as specified by the catalog. If you were given permission to take course(s) at another college to complete your graduation requirements, you must include that information with your graduation application. Final transcripts MUST be received no later than the last day of class in your graduation term. Information concerning the spring commencement ceremony (caps and gowns, invitations, line-up directions, etc.) will be sent to your email addresses on file no later than March 31. For additional information, please see the graduation webpage.

First Name	Middle Name	Last Name	Maiden Name	
Phonetic Spelling of Name		Expected Graduation	Expected Graduation Term	
GTCC Student ID Number or Last Four Digits of Social Security Number		y Number Date of Birth	Date of Birth	
Address		City	State Zip	
Cell Phone Number		Alternate Phone Num	Alternate Phone Number	
GTCC Email		Personal Email		
☐ I would like	to have my permanent record	updated to include the name	and address on this application.	
I am applying fo	ra: □ Degree (Two-year) □	Diploma (One-year) □ Certi	ificate	
In (Program Nar	ne):			
(Program Cod	de):			
	Fo	or Office Use Only		
Notes:		Record	s Processing Center	
		Appl. Entry: GPA: Grad: DOD Entry:		