

GRADUATION APPLICATION

Student ID #: _____



Name: _____
Last First Middle

Please print your name exactly as you wish it to appear on your diploma:

Catalog Year: _____ AA Degree BAS Degree AS-T Degree AAS Degree Certificate

Anticipated Quarter and Year of Completion: Fall Winter Spring Summer _____

Mailing Address: _____
Street

City State Zip

Phone: _____ CBC Email: _____

Are you a member of Phi Theta Kappa (PTK) Honor Society? Yes No

CBC may issue a high school diploma when required criteria are met per State of Washington SHB 1758:

- Have you ever received a high school diploma? Yes No
- Are you currently in the process of earning a high school diploma from your high school? Yes No
- Are you requesting CBC to award you a Washington state high school diploma? Yes No

I understand that I have the responsibility for ensuring that I have met all of the requirements for the degree and/or certificate for which I am applying and that the final review and award will be determined by the Registrar.

Student Signature: _____ Date: _____

I support the submission of the Petition for Graduation to the Registrar for final review and awarding of degree or certificate.

Advisor/Counselor Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

CBC Credits: _____ GPA: _____ Transfer Credits: _____ GPA: _____ Transfer Credits: _____ GPA: _____

Honors High Honors Cum Laude Magna Cum Laude Summa Cum Laude

Approved? Yes No

Reason for Denial: Insufficient credits for specific dept. distribution Insufficient credits for degree
 Insufficient GPA Other: _____

Registrar Signature: _____ Date: _____

Recorded: _____ Mailed/Picked Up: _____