

Application for Graduation Transfer Degree / Academic

Applic	ant Informa	tion			
Print Student's Name	Preferred Name to appear on Diploma				
Email	Student ID				
Please fill out the address information belo					led.
Please note that diplomas are mailed ap	oproximately 1	12 weeks afte.	t the end of	the quarter.	
treet Address and Apt # (if applicable)			City, State, Zip Code		
NOTE: Official copies of other college transcripts with credits	applied toward r	equirements m	ıst be on file i	n order for you	to graduate.
I am applying to graduate at the end of the following quarter:	Spring	Summer	Fall	Winter	Year
udent Signature Date					
Check the box of the Degree you are applying for:	:				
General Transfer Associate in Arts - Direct Transfer Agreer			Business DT	A/MRP	
Associate in Arts - Individualized Plan (AA-IP) Individualiz			Pre-Nursing		
	ical Voice	Classical F		Instrumenta	l Music
Associates in Fine Arts: Studio Associates in Fine Arts: Photo					
Associate in Science-Transfer (AS-T) Track 1 Associate in Science-Transfer (AS-T) Track 2					
Bioengineering and Chemical Engineering AS-T Track 2/MRP Construction Management DTA/MRP					
Computer and Electrical Engineering AS-T Track 2/MRP					
Mechanical/Civil/Aeronautical/Industrial/Materials Science	e Engineering A	S-T Track 2/M	RP		
Associates in Applied Science - Transfer (Note: Completed,				this form)	
Name of Program	0 1 0				
Associates in Applied Arts & Science (Note: Completed, sign				s form)	
Name of Program	-			.5 101111)	
Optional HS Diploma Award (Student does not have a HS di				rded with their	degree)
For Office Use Only	proma and to for		proma oc awa		
Graduation Approved? Yes No Date:	Tern	n:	Tra	nsfer Credit:	
Diploma Ordered: SCC GPA:	Hone	ors:	Di _l	oloma Sent: _	

Shoreline Community College is committed to nondiscrimination and to providing access and reasonable accommodation in its services, programs, and activities for individuals with disabilities. To request disability accommodation contact Student Accessibility Services, at least ten days in advance at: 206.546.4545, or e-mail at sas@shoreline.edu.

Updated 07/2025 Page 1 of 1