Shoreline COMMUNITY COLLEGE

Office of the Registrar

Application for Graduation

Print your full name as you would like it to appear on the diploma (print legibly):

_____
First Name   Middle Name   Last Name   Student ID #

_____
Street Address   Apt. #   Daytime Phone #

_____
City   State   Zip Code

Address to which you would like your diploma mailed, if different:
(Diploma will be mailed 8-12 weeks after quarter's end.)

_____
Street Address   Apt. #   Daytime Phone #

_____
City   State   Zip Code

List all other colleges you have attended: *(NOTE: **Official** copies of all other college transcripts **must** be on file in order for you to graduate.)*

_____

I am applying for graduation at the end of (circle one below):

FALL   WINTER   SPRING   SUMMER   Year: _____

SELECT TYPE OF DEGREE (circle 1 or 2 below):

1. Associate in Arts & Sciences (AAS)

For the AAS degree, check Option A or B below:

☐ **Option A** (Appropriate for transfer within Washington to CWU, EWU, WWU, WSU, Evergreen, PLU, SPU, SU, NW College, and UW branch campus because it transfers as a package and fulfills all general education requirements; also most proficiency and distribution requirements at UW will be completed.)

– OR –

☐ **Option B.** For Option B, you must state the college you will be transferring to:

_____
Name of four-year college

(The four-year college will evaluate student transcript on a course-by-course basis toward degree requirements.)

2. Associate in Science (AS)

For the AS degree, check Track 1 or Track 2:

☐ Associate of Science/**Track 1**

(Biological Sciences, Chemistry/Biochemistry, Environmental/Resources Sciences, Geology & Earth Sciences, Oceanography, Pre-pharmacy, Pre-veterinary Medicine),

☐ Associate of Science/**Track 2**

(Computer Science, Engineering, Physics/Astronomy/Astrmospheric Sciences)

3. Associate in Applied Arts & Sciences (AAAS):

_____
Name of program

(To apply for AAAS you **must** attach a copy of your program planning sheet, signed by your program advisor and division chairperson.)

STUDENT'S SIGNATURE _____ **DATE** _____

FOR OFFICE USE ONLY

Graduation approved _____ **Date** _____
                         Signature of credentials evaluator

Degree entered _____ Quarter _____ TR cr _____

Diploma ordered _____ SCC gpa _____ Honors _____

Diploma sent _____ ICRC/program _____   ES-100101