

## WYTHEVILLE COMMUNITY COLLEGE GRADUATION APPLICATION

<u>Directions</u>: An advisement report reflecting enrollment in the last semester of courses must be attached to the application. Applications must be signed by the student, the faculty advisor, and the division dean. Incomplete applications will not be accepted/processed. Please submit completed applications to the Admissions Office by the appropriate deadline:

Fall - November 1, Spring - December 1, Summer - July 15

		11 - 110 verilibe	z i, spiii	g - Decei	inser 1, su		I - july 15	
Name:				Student ID#:				
First Nan		Middle		Last		ıffix		
(	(Please pri	nt name as you	would like f	or it to app	pear on degr	ee, dip	loma, or certificate)	
Mailing Address	s:	Box or Street			City		State	Zip Code
Email:				,	Cell/Phone:			·
Communic	cation regardir	ng this application wil	ll be sent to this	address.	Jeil/Filone.	May we	text you at this number?	Yes or No
Name of progra	m(s)*:							
					rams for which			_
Anticipated Se	emester o	f Graduation:	☐ Fall (Ded	cember)	Spring**	(May)	Summer (August)	
	articipate in t	he spring graduation	on ceremony in	May. If this is	s the case, you	must lis	those classes in summer set <u>SUMMER</u> as your anticipate irements.	
							<b>t required)</b> ☐ Yes or ll/Dual Enrollment Stude	
Student Signature:					Date:			
Check here if college publication							e graduation program or	other official
		Facu	lty Grad	uation	Certifica	ation	1	
Program(s): (1)			(2)				(3)	
CLASSES N	IFFDFD	TO COMPLE	TF PROGE	RAM RFC	UIRFMEN	TS	Student will complete	graduation
FAL					SUMMER		requirements by the end of:	
Course	Credits	Course	Credits	Course	Cre	dits	Fall, Spring, or [	Summer
							Student has the requi	
							Please list any course	es student is
							taking at another colle	ege:
Notes/Comme	nts:							
SIGNATURES: Faculty Advisor							Date	
Division Dean							 Date	
ADMISSIONS								
						Dot	Cortified	
Registrar							e Certified	
Cumulative GP	Α	Honor	s. Ucum	rande [	iviagna Cun	ı Lauc	e Summa Cum La	uae