Pulaski Technical College
Application for Graduation

Office Use Only

All required courses must be completed before the degree will be issued. Graduation applications are kept on file for one year. If requirements are not met within that timeframe you will need to reapply for graduation when all requirements are met. Diplomas will be mailed to the student's address after the degree has been verified, approximately 4 – 6 weeks after graduation. Transcripts are the official document indicating the degree and one may be requested approximately 3 weeks after graduation.

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In which semester will you complete all requirements? Fall Spring Summer Year: _____

Name in PTC system: _____ SSN: _____

Print clearly the name you wish to be printed on your diploma:

_____
First Middle Last

Note: Please be sure to notify Student Services of any address changes as the address in that system is the one the diploma will be sent to.

Home Telephone: _____ Work Telephone: _____

Attendance at the May ceremony is highly recommended. Please advise if you will be attending? No Yes

To order cap and gown

Height: _____

Weight: _____

DEGREE or CERTIFICATE INFORMATION

Please list all colleges/universities you have attended (if any) on the back of this form. Transfer transcripts should be on file in the Office of the Registrar at the time of submission of this application. Verification and awarding of the degree may not be made without the transcripts. Please submit these documents as early as possible to reduce any delay.

Check the appropriate **DEGREE/CERTIFICATE** and identify the **Program Name** and/or **Option** information for the specific degree.

Degree Type	Program Name or Option:
☐ Associate of Arts	General Education for Transfer
☐ Associate of Arts in Teaching	Math/Science Language Arts/Social Studies PK-4
☐ Associate of Science	General Education Computer Science Business Private Pilot Aviation Management
☐ Associate of Applied Science	**Major:** _____ **Option:** _____
☐ General Studies	Associate OR Certificate
☐ Technical Certificate	**In:**
☐ Advanced Certificate	**In:**
☐ Certificate of Proficiency	**In:**

What year did you begin working on this degree plan? _____ (The year determines which catalog is used.)

By signing this application I understand that all requirements must be completed before this degree is awarded. I understand that I must not owe a balance to the College at the time of graduation or the degree will not be awarded.

Signed: _____ Date: _____

Return this form to the Office of the Registrar by the noted deadline.

Application deadline: **December – November 1**
May – February 7
August – July 7

(Revised: 01-14-11 (BH))