

# GRADUATION APPLICATION



Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
Last First M.I.

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

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

Degree (choose one):  AA Degree  BAS Degree  BSN Degree  
 AS-T Degree  AAS Degree  Certificate

Catalog Year: \_\_\_\_\_ Quarter/Year of Completion:  Fall \_\_\_\_\_  Winter \_\_\_\_\_  
 Spring \_\_\_\_\_  Summer \_\_\_\_\_

Courses to Complete	College	Date of Completion

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***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 Graduation Application to the Registrar for final review and awarding of degree or certificate.***

Advisor: \_\_\_\_\_  
Print name Signature Date

## FOR OFFICIAL USE ONLY

CBC Credits: \_\_\_\_\_ GPA: \_\_\_\_\_ Transfer Credits: \_\_\_\_\_ GPA: \_\_\_\_\_ Transfer Credits: \_\_\_\_\_ GPA: \_\_\_\_\_

Approved?  Yes

Honors  High Honors  Cum Laude  Magna Cum Laude  Summa Cum Laude

Approved?  No

Reason for Denial:  Insufficient credits for specific dept. distribution  Insufficient credits for degree

Insufficient GPA  Other: \_\_\_\_\_

Registrar Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Recorded: \_\_\_\_\_ Mailed/Picked Up: \_\_\_\_\_