

## **APPLICATION FOR GRADUATION**

Candidates must meet all requirements for graduation and clear all financial obligations to NLTCC prior to issuance of a diploma. All Information must be completed in entirety and must be legible.

Print student's name as it appears on our records			Banner ID		
Social Security Number					
Address			City/State/Zi	ip	
	( )			/ /	
()	()Alternate Telephone Number			Date of Application	
Please list other names used as a st	udent:				
<b>RECORDS.</b> (Documentation	to support this cha	ange must be suppli		APPEARS ON YOUR STUDENT is form.)	
Name as it should appear on diplo	ma:First	Middle	Last	(include suffixes, Jr. Sr. II, etc.)	
	Tist	Wilder	Lust	(metade surrives, 31. 51. 11, etc.)	
<b>EDUCATIONAL INFORMATI</b>	ON				
□Date of High School Graduation:	41- X7	3.4	41- 37		
Dates of Attendance at LTC: From:	/ to	/ Academic	Program	Major:	
Please list any semesters of non-atter	S/Y)	(S/Y)			
Check which you are applying for:  □Associate of Applied Science  □Technical Diploma	□Certifica	te of Technical Stue	dies		
Expected Month/Year of Completion (	Please check one)				
YEAR:   Fall (Decemb		Spring (May Grad	duation)	Summer (December Graduation)	
If any classes are waived or substitute Office.					
COMMENCEMENT CEREMO	NY: Do you nlan	to participate in the	e commen	cement ceremony? Yes No	
If you <b>DO NOT</b> plan to attend the C					
□Will pick up	ommencement Cel	emony, picase ellec	ck the app	Topriace DOX.	
• •	-				
□Please mail to: (please provide address) Permission to use your name in the c			releases?	Yes □ No □	
Student signature		No.			
For Admissions and Records Use (	Only				

Date Received: \_\_\_\_/\_\_\_ Received by: