

# EAST CENTRAL COMMUNITY COLLEGE APPLICATION FOR GRADUATION

www.eccc.edu

(Return to Office of VP for Instruction, P.O. Box 129, Decatur, MS 39327 or email [thouston@eccc.edu](mailto:thouston@eccc.edu) )

ID#: \_\_\_\_\_ NAME: \_\_\_\_\_

**As you want it to appear on your diploma**

ADDRESS: \_\_\_\_\_

(Street, Route, or P.O. Box)      (City)      (State)      (Zip Code)      (E-Mail)

COUNTY OF RESIDENCE: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

CURRICULUM/MAJOR: Academic \_\_\_\_\_ Technical \_\_\_\_\_ Vocational \_\_\_\_\_  
Example:      (LAR, BAD, etc.)      (ELT)      (WLD)

SEX: \_\_\_\_\_ Male, \_\_\_\_\_ Female    HEIGHT: \_\_\_\_\_    WEIGHT: \_\_\_\_\_    CHEST/BUST: \_\_\_\_\_    CAP SIZE: \_\_\_\_\_

I hereby apply for the associate degree in (AA) \_\_\_\_\_ arts, (AS) \_\_\_\_\_ science, (AAS) \_\_\_\_\_ applied science or the \_\_\_\_\_ vocational certificate in \_\_\_\_\_ and assume the obligation for a (CE 1 yr. or CE 2 yr.) \$40.00 Graduation fee if I am accepted as a candidate for graduation. **(The graduation fee is non-refundable and will not apply to any future graduations.)**

I am familiar with the requirements for graduation in my curriculum and have met those requirements to the best of my knowledge. I further understand that participation in graduation practice and the commencement ceremony is essential in being awarded this diploma/certificate.

I plan to complete the requirements for graduation in \_\_\_\_\_ December, \_\_\_\_\_ May, or \_\_\_\_\_ August.

I have repeated courses at East Central Community College and I understand that I only received credit once for the repeated course. \_\_\_\_\_ yes, \_\_\_\_\_ no. I am currently repeating a course taken in a previous semester \_\_\_\_\_ yes, \_\_\_\_\_ no.

I have completed or am currently taking course work at another institution that is necessary to complete the requirements for this degree. \_\_\_\_\_ yes, \_\_\_\_\_ no. If so, has a transcript been sent to the Office of Admissions, Records, and Research? \_\_\_\_\_ yes, \_\_\_\_\_ no.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

**Vice President for Instruction Only:**

Hours Completed	Enrolled	GPA
Comments:		

Date Reviewed: \_\_\_\_\_

Revised 5/09