



Mail Form To:  
 Student Records/Graduation  
 P.O. Box 19000  
 Portland, OR 97280-0990

# Application for Graduation

Student Records/Graduation  
 Phone: 971-722-7100  
 Fax: 971-722-7135

Please fill out and submit this form as soon as you have registered for your final term.

First Name _____	Last Name _____	MI _____	G# _____
PCC Email Address _____		Daytime Phone # _____	
Student Signature _____		Date _____	

Once your application has been processed and approved, you will receive instructions via MyPCC email on how to submit the name you want to appear on your diploma/certificate, as well as your diploma address.

**WHAT DEGREE or CERTIFICATE ARE YOU COMPLETING? \* ONE REQUEST PER APPLICATION \***

Check here if CHANGE of degree/certificate     Check here if ADDING a degree/certificate

Term of Graduation \_\_\_\_\_ Which Catalog Year\* Will You Graduate Under? \_\_\_\_\_

Associate of Arts – Oregon Transfer                       Associate of Science Oregon Transfer – Business

Associate of Science     Associate of General Studies

Associate of Applied Science in \_\_\_\_\_

Certificate     One Year     Two Year    Title \_\_\_\_\_

Oregon Transfer Module

*\* See PCC Catalog Degree, Certificate, and Course Overview section for Catalog Year rules.*

**CLASSES YOU PLAN TO ENROLL IN TO COMPLETE YOUR DEGREE OR CERTIFICATE**

Please include Course Number & Title (Example: WR 121 - English Composition).

Current Term	Final Term
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

**OTHER COLLEGES YOU HAVE ATTENDED**

Please list the institutions that have credits applicable to your degree or certificate.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**It is the student's responsibility to have all official transcripts on file in Student Records.**

Filing Year _____	<b>Student Records Use Only</b>	Sequence _____
Evaluator _____	Degree/Certificate _____	
Pending-Candidate    Denied    Date _____	Term of Graduation _____	