

Admissions & Records Office APPLICATION FOR GRADUATION

Name (Pleas	e Print): La		First			Middle				
Student ID			Date	e of Birth:			_Male	Female		
Other Name	es Used:									
Address to	which diploma	or certificate s	hould be ma	iled. Check b	ox to update	your records	to the addres	ss listed be	elow	
Number and	d Street			City, Stat	e	Zip	Code			
Email addre	ess:			Day Phone: ()						
	for the end of: <u>e:</u> you may on							ts.		
	for: AA degree			-			-	_		
LMC Major	(Must be list			Catalog Year (Refer to the information on catalog rights.)						
2 nd Major				_ 3 rd Major						
AA/AS degr Other collec (Official trar I will particip	using the trans ee. ges attended: _ scripts must b pate in the grac ame <u>exactly</u> a	e on file before	e this applica	tion will be a	ccepted)			our transfe	r path	
First Middle					Last					
 If th If th Please cheory Transferring 	<i>my name and</i> le box is marke le box marked ck appropriate g to CSU or UC	ed 'yes' or left b 'No', your nam box: : EOPS S	blank, your n ne will not be	ame will be p printed on th] DSPS St	rinted in the e program. udent	-	ogram	No 🗌		
Office Use						1				
LMC DA Units:			Units in Progress:			Total Units:				
Tot Units	Cum GPA	Honors	12 units	Approved	Pending	Denied	Evaluator	Date		
Final GPA:			Posted to	Franscript:		Diploma Sen	l it:			