

Northeast Lakeview College Graduation Application

Associate of Arts-Associate of Science-Associate of Arts in Teaching

Banner ID:		Date:	
(Please Print)	Last Name	First Name	M.I.
Former/Maiden Na	nme(s):		
	Last Name	First Name	M.I.
Desired Name on I	Diploma:	First Name	- ACTU N
(No nicknames)	Last Name	First Name	Middle Name
Address:			Zip Code
E-mail Address:		Day Phone:	-
Mobile Phone:		Work Phone:	
		work i none:	
Step 2: Academic	<u>Information</u>		
1. When do you in	tend to complete you	r degree?	
2. What catalog ye	ar are you using for g	graduation?	
3. What is your pre	e-major at Northeast	Lakeview College?	
	oraa?		

Previous Colleges or Universities Attended College/University **Dates Attended** Full Name and State **Step 3: Commencement Information** 1. Will you be participating in the Commencement Ceremony? Yes () N0 () a. If yes, please provide the following information: Height (Feet and Inches)_____ Gown Size: Regular () 1X () 2X() **Step 4: Personal Responsibility** The semester before you plan to graduate – You are responsible for: 1. Submitting a graduation application on or before the deadlines for Fall (October 1), Spring (March 1), Summer (July 1) graduation. 2. Ensuring official transcripts from all institutions are on file in the Student Success Center. 3. Ensuring that all non-traditional credit (CLEP, Advanced Placement, Military, etc.) is recorded in the Student Services Office. 4. Making arrangements at the other institutions to have final grades sent to Northeast Lakeview College by the end of the semester, if you are taking courses at another institution during your final semester. 5. Clearing all account balances owed to the Alamo Colleges and consulting the Financial Aid staff regarding any outstanding student loans. 6. Clearing any holds on your records. 7. Completing all course requirements as prescribed by the chosen degree plan **prior** to the end of the semester for which you are applying for graduation. 8. Attend a Graduate Resume Workshop or individual appointment with The Office of Career Services and Job Placement. Date: Failure to complete this requirement will result in a student services hold. 9. Making sure that you are in **GOOD scholastic standing**.

Student Signature: _____ Date: _____

**************************************	Office Use Only**********************	
Evaluation Sent:	•	
Commencement letter Sent:	Phi Theta Kappa: Yes () No ()	
Final Approval and Posted: Diploma Sent:		
Evaluator Signature:	Date:/	
ADVISOR SIGNATURE	DATE:	
Printed Name:		

INSTITUTION OF TRANSFER:_____