



# Graduation Application - Mott Community College

Today's Date \_\_\_\_\_

**Graduation Completion Date:** Fall - (December) Winter - (May) Spring - (June) Summer - (August)

NAME \_\_\_\_\_  
**PRINT name exactly** as you would like it on the diploma Mott ID Number \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

\_\_\_\_\_**MALE** ETHNIC BACKGROUND: (check one) PHONE \_\_\_\_\_  
\_\_\_\_\_**FEMALE**  
1. American Indian \_\_\_\_\_ 4. Hispanic \_\_\_\_\_  
2. Asian \_\_\_\_\_ 5. Caucasian \_\_\_\_\_  
3. Black \_\_\_\_\_ 6. Foreign \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

### 1. ASSOCIATE DEGREE CANDIDATES

### 2. ONE YEAR CERTIFICATE OF ACHIEVEMENT

\_\_\_\_\_**Associate in Arts - (meets MACRAO)**

\_\_\_\_\_  
Write name of Certificate Program above (see program list over)

\_\_\_\_\_**Associate in General Studies**

\_\_\_\_\_**Associate in Science**

### 3. CHECK FOR MACRAO \_\_\_\_\_

\_\_\_\_\_**Associate in Applied Science**

**Results from this audit will be sent to your Mott Community College Email.**

Write name of Applied Science Degree above (see program list over)

**BELOW IS FOR OFFICE USE ONLY**

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Degree: \_\_\_\_\_

Mailed: \_\_\_\_\_

G.P.A. \_\_\_\_\_

P.R. Posted \_\_\_\_\_

Deficiencies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notice sent: \_\_\_\_\_ Date received: \_\_\_\_\_