



Instructions: Review your Academic Progress in ctcLink and/or meet with your academic advisor. Once you have confirmed your eligibility, submit this form to the Registration Office. You will receive an email notification once your application has been reviewed.

Student Information

Full Name (Must match student records): _____

EMPLID (ctcLink) Number: _____ **Today's Date:** _____

Name Desired on Diploma (if different from above): _____

Mailing Address For Diploma – Street Address: _____

Apt. Number (if applicable): _____ **City:** _____ **State:** _____ **Zip Code:** _____

Email Address: _____ **Are you a member of Phi Theta Kappa:** _____

Degree Information

Which degree are you pursuing (select one)?

Select One

When is your anticipated quarter of completion?

20

Are you 16 years of age and requesting a college-based high school diploma?

No, I am not requesting a college-based high school diploma.

Are you working towards an optional emphasis (select if applicable)?

No, I am not working towards an optional emphasis.

Schedule Information

Second to Last Quarter: 20

1. List your classes for this quarter.

2. _____

3. _____

4. _____

5. _____

6. _____

Last Quarter: 20

1. List your classes for this quarter.

2. _____

3. _____

4. _____

5. _____

6. _____

→ FOR OFFICE USE ONLY ←

Credits
Earned

REQUIREMENTS

Transferred

Earned at SCC (15 min.)

Total Earned to date

From Schedules above

Final Total (90 min.)

Current cumulative GPA

Final cumulative GPA(2.0 min.)

__Logged __Posted __Mailed

A.	_____	_____	_____
B.	_____	_____	_____
C.	_____	_____	_____
D.	_____	_____	_____
E.	_____	_____	_____
F.	_____	_____	_____
G.	_____	_____	_____
H.	_____	_____	_____
I.	_____	_____	_____
J.	_____	_____	_____
K.	_____	_____	_____