

## **SPRING 2015 Graduation Application**

Please return this form and \$50 Application Fee to Campus Cashier by FEBRUARY 5, 2015

SECTION I: STU	JDENT INFORMAT	TION	
			Southorn ID#s C
First Name	Middle	Last	Southern ID#: <b>S</b>
			Birth Date:
Mailing Address			
City	State	Zip Code	Telephone:
•	ploma (PRINT CLEARLY)		
Name to Appear on bi	pioma (FRINT OLLAILET)	<i>)</i> .	
First N	ame	Middle	Last
SECTION II: GR	ADUATION INFOR	RMATION	
Program of Study*: *must be entered to prevent delay in processing of application			
Degree/Certificate to be awarded:			
Certificate	Associate in Arts	Associate in Science	Associate in Applied Science
List all previously attended colleges, excluding Southern WV CTC:			
List all previously attended colleges, excluding Southern WV CTC.			
I will pick up my diploma at the following Campus:			
Boone Loga	an Campus Wil	liamson Campus Wy	roming Campus <u>OR</u> Please Mail
SECTION III: ST	UDENT SIGNATUR	RE	
By signing below, I accept full financial responsibility for payment of the graduation application fee and			
		ed with my account, as w Vest Virginia Community	ell as submission of official transcripts
•	9	vest virginia Community	9
Student Signature Date			
REGISTRAR'S OFFICE USE ONLY:		AP Entered By:	Status: SO CP
Trans ck/Letter	Hold ck/Letter	Date: GPA(min 2.0)	Date: HONORS (min 3.40) Y N
Program	Info Letter	Card	Diploma
Comments:	IIIO LORIOI	1 3414	Diploma