

## Northeastern Junior College Application for Graduation

Student ID #: <b>S</b>	_ Term you are ap	olying for: Fall	Spring S	ummer	_ Year	
Today's Date:/	Phone Number: (	)				
	E-mail Address:			(Must Provide	)	
Name as Desired on Diploma:						
Mailing address (your diploma will be mailed to	this address)					
Address		City		State Zip	Code	
N	voto ovolication is voc.	ined for each deare	a ay aaytifi aata			
A separate application is required for each degree or certificate						
Choose 1 below:	Write 1 below:					
Associate of Arts Degree				Major/Program	of Study	
Associate of Science Degree	,	Advisor Section:				
Associate of General Studies Degree	1	Is this application for a Degree with Designation (DWD)?				
Associate of Applied Science Degree	ciate of Applied Science Degree  If yes, please indicate which DWD?					
Certificate		Catalog Student is using:				
		Advisor Signature:				
NJC holds one commencement ceremony each year in May, and we invite all of our summer, fall and spring graduates to participate!						
Are you planning to participate in the May commencement ceremony? Yes No						
If yes, please watch for more information about your Cap and Gown order and pick-up dates!						
Office use: SHADEGR Sent to Student: Sent to Advisor: Evaluated: Diploma Date: Graduated:						