



# Bellingham Technical College

## GRADUATION APPLICATION PACKET

BTC program students who expect to complete their program must submit this graduation application to be awarded a Degree/Certificate. Following application and verification of completion of all program requirements, students will have their degree or certificate posted to their transcript.

**Diplomas are mailed out 8-10 weeks after all program requirements are completed, and posted to the transcript. To ensure timely processing of your program completion, please submit your application by the second week of your final quarter. Late applications will be accepted, but may not be processed until the following quarter. Contact the Registration Department at 360.752.8348 for questions or address changes regarding your application.**

### APPLICATION PROCEDURES

1. To print out an application, go to BTC's Website at [www.btc.ctc.edu](http://www.btc.ctc.edu). Choose Student Resources, Registration, Forms & Publications and Degree Certificate Application. Or, pick up an application packet at the Registration Department, located in the College Services Building.
2. Complete the Degree/Certificate Application.
  - A. If your program is listed below or if course requirements in your program may have changed while you were enrolled, submit the application to your instructor for verification of completion.  
  
Fisheries    Welding
  - B. If your program is not listed above, submit your application directly to the Registration Department.
3. All program requirements will be verified after final quarter grades have been posted. This requires 8-10 weeks for processing. You will be notified in writing if your application has been denied.
4. Your diploma will be mailed to you at the address you have given on your application. Diplomas that are returned as undeliverable will not be forwarded.
5. **Complete the attached Employer Survey.**
6. **If you are planning to participate in commencement complete the attached form.**

**Bellingham Technical College** does not discriminate against any person on the basis of race, color, national origin, disability, sex, genetic information, or age in admission, treatment, or participation in its programs, services and activities, or in employment. All Inquiries regarding compliance with access, equal opportunity and/or grievance procedures should be directed to the Associate Director of Human Resources, Bellingham Technical College, 3028 Lindbergh Avenue, Bellingham, WA 98225 or call 360.752.8355.



# Bellingham Technical College GRADUATION APPLICATION

Date \_\_\_\_\_  
Submitted \_\_\_\_\_

**PLEASE PRINT YOUR NAME & ADDRESS CLEARLY. USE your LEGAL NAME as it appears on your student record. (You may add your middle name or initial.) Your application may be delayed or returned if information is incomplete.**

\_\_\_\_\_  
FIRST MIDDLE LAST Student I.D. Number Date Submitted

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

MAIL DEGREE/CERTIFICATE TO: \_\_\_\_\_  
STREET CITY STATE ZIP

**YOU MUST COMPLETE A SEPARATE APPLICATION FOR EACH DEGREE OR CERTIFICATE FOR WHICH YOU ARE APPLYING.**

**CERTIFICATE** \*Please specify exactly the certificate for which you are applying.

PROGRAM TITLE \_\_\_\_\_

Are you applying for more than one certificate?  YES  NO      Are you reapplying for graduation?  YES  NO

**AAS DEGREE** or  **AAS-T DEGREE** \*Please specify exactly the certificate for which you are applying.

PROGRAM TITLE \_\_\_\_\_

Are you applying for more than one degree?  YES  NO      Are you reapplying for graduation?  YES  NO

- What quarter do you plan to complete?  Fall  Winter  Spring  Summer 20\_\_\_\_\_
- Which catalog will you graduate under:
  - Current academic year
  - When you first entered the program \_\_\_\_\_ catalog year\*

\*You may elect to graduate under the provisions of the catalog in force either at the time you first entered the program OR at the time you apply for a Degree/Certificate, providing four (4) years have not lapsed AND you have remained **continuously** enrolled in the program. Your program instructor will assist you in determining which program requirements are necessary for the catalog under which you will graduate.

**Do you plan to participate in the June Commencement ceremony?**  Yes  No  
**If yes, complete the Commencement Participation form attached.**

**Are you interested in receiving eligibility information for a High School Diploma**  YES  NO  
*(If check yes, information will be mailed to the address listed above.)*  
Information and the School Diploma Application are also available on our BTC website: [www.btc.ctc.edu/StuServices/Registration/Forms.asp](http://www.btc.ctc.edu/StuServices/Registration/Forms.asp)

### FOR OFFICE USE ONLY

Director of Registration and Enrollment verification of final completion of course requirements/Minimum GPA:

Approval Reason for Denial: \_\_\_\_\_

Denied Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President's List Year/Quarter awarded \_\_\_\_\_

Degree/Certificate Posted to Transcript Date: \_\_\_\_\_  Certificate Mailed Date: \_\_\_\_\_

Re-Application-Approved. Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Bellingham Technical College

## GRADUATION APPLICATION

### Employment Information

Please complete this form regarding your current employment. Please print clearly.

Name: \_\_\_\_\_  
First
Middle
Last

BTC Program: \_\_\_\_\_ Quarter Graduated: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

SID#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you currently employed?  YES  NO

Full-time or part-time?  F/T  P/T

Are you working in a job related to your field of study?  YES  NO

What is your job title? \_\_\_\_\_ What is your current wage? \_\_\_\_\_

How did you find your current job? \_\_\_\_\_

**Your Employer Information:**

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I am interested in writing a testimonial about my education and experience at BTC for use in college marketing and promotional materials. (\*You may be contacted at some point after you graduate)

Thank you for taking the time to provide this information. Career Services are provided to BTC students and graduates to assist them in the job search process. To contact Career Services, email: [careerctr@btc.ctc.edu](mailto:careerctr@btc.ctc.edu) or call 360-752-8396.



# 2014 COMMENCEMENT PARTICIPATION REGISTRATION FORM

## DEADLINE: May 16, 2014

Participation in Commencement is reserved for students who complete the requirements for the Associate in Applied Science Degree or a Certificate of Completion of **45 or more credits** from Fall Quarter 2013 through Summer Quarter 2014.

**Where:** Mount Baker Theatre  
104 N. Commercial Street  
Bellingham Washington 98225

**When:** Tuesday, June 24<sup>th</sup>, 2014  
7:00 pm

Yes, I plan to participate in the June 2014 commencement ceremony.

NOTE: In order to receive your official degree or certificate following your completion, you must submit a Graduation Application Packet.

I understand that in order to participate in Commencement, I will wear a black cap and gown. (Caps and gowns are available for purchase from the BTC Campus Store for approximately \$35.00, including tax. Contact the BTC Campus Store to purchase cap/gown or tassel only. Available beginning in May. Cash or checks made payable to Bellingham Technical College.)

- **Guest tickets are required for the Commencement Ceremony.** Guest tickets are free of charge. It is necessary to **limit the number of guests to four (4) per participating graduate. Ticket is required for each guest.**
- Guest tickets are to be picked up **May 28** in G Building.
- Please look for answers to your questions at [www.btc.ctc.edu/StuServices/graduation/indexgraduation.asp](http://www.btc.ctc.edu/StuServices/graduation/indexgraduation.asp)

I will be receiving:

- Certificate (of 45 or more credits)**
- Associate in Applied Science**

**Each participating graduate is eligible for four (4) guest tickets.**

**Program** \_\_\_\_\_ **Completion Date** \_\_\_\_\_

**Student I.D. #** \_\_\_\_\_

**Name** \_\_\_\_\_  
Last First M.I.

**Address** \_\_\_\_\_  
Street Apt. No.

\_\_\_\_\_  
City State ZIP

**Telephone** (\_\_\_\_) \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

Please complete and return to:  
**BELLINGHAM TECHNICAL COLLEGE**  
Registration Office, College Services Building  
3028 Lindbergh Ave, Bellingham WA 98225-1599 (360) 752-8348