

Bellingham Technical College HIGH SCHOOL DIPLOMA APPLICATION

Effective 2009, students earning an associate degree from a community or technical college are allowed to earn a state high school (HS) diploma according to SHB 1758. Students selecting this option are not required to complete the State Board of Education's high school graduation requirements.

Students who are interested in earning the High School Diploma through Bellingham Technical College (BTC) <u>must</u> <u>complete and present this form to the Registration Department.</u> 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. Upon verification of completion of BTC Associate of Applied Science (AAS) or Associate of Applied Science-Transfer (AAS-T) degree, a high school diploma will be posted to the student's BTC transcript along with the earned associate degree.

Eligibility for a high school diploma awarded by BTC will only be conferred for students who have not already earned a high

| school diploma. Please check which eligibility criteria apply to you: | | |
|--|----------------------------------|----------------------------|
| ☐ I am or have been a Running Start* stu | ident and am under 21. Birthdate | High School |
| ☐ I have never participated in the Running Start program and am 21 or older. | | |
| *Running Start students are juniors or seniors in high school who can earn both high school and college credit simultaneously by enrolling in a community or technical college and some four year higher education institutions through the Running Start program. | | |
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| PLEASE FILL OUT THIS FORM COMPLETELY FOR CONSIDERATION: Your application may be delayed or returned if information is incomplete. | | |
| NAME: (as you wish it to appear on diploma) DO NOT USE NICKNAMES. PLEASE PRINT CLEARLY. | | |
| FIRST MIDDLE | LAST | Student I.D. Number or SSN |
| MAIL DEGREE/CERTIFICATE TO: | | |
| | | |
| STREET ADDRESS | CITY | STATE ZIP |
| PHONE | EMAIL | |
| Have you already received an Associate Degree at BTC? ☐ No ☐ Yes Quarter/Year: | | |
| Program name (please print): | | |
| If no, when do you anticipate graduating with a degree: Summer Fall Winter Spring | | |
| I certify that all of the information I have provided on this form is true and complete to the best of my knowledge, and that untruthful or misleading information is cause for rejection of my waiver request and retroactive billing. | | |
| Student signature: | | Date: |
| Guardians signature: | | Date: |
| FOR OFFICE USE ONLY Director of Registration and Enrollment verification of final completion of course requirements/Minimum GPA: | | |
| Approval Reason for Denial: | • | <u> </u> |
| Denied Signature: | | Date: |
| Degree/Certificate Posted to Transcript Date: | | Year/Quarter awarded |
| | | Certificate Mailed Date: |
| Re-Application-Approved Signature: | | Date: |