

GRAYS HARBOR COLLEGE
APPLICATION FOR DEGREE

(Submit a separate application for each degree)



NAME _____
PRINT as you wish it to appear on your diploma

SID# _____ / _____ / _____

EMAIL ADDRESS: _____

ADDRESS you want diploma mailed to: _____

City

State

Zip

YEAR & QUARTER in which you expect to complete the graduation requirements:

_____ Year _____ Fall (Dec.) _____ Winter (March) _____ Spring (June) _____ Summer (Aug.)

This degree is from the GHC catalog year _____ (i.e. 2006 – 08)

Type of degree for which you are applying

_____ A.A. (Associate in Arts) – DTA

_____ AGS (Associate in General Studies)

_____ ABDT (Assoc. in Business Direct Transfer)

_____ AS (Associate in Science) _____
Major Field

_____ Associate in Pre-Nursing – DTA/MRP

_____ AAS (Assoc. in Applied Science)

_____ Associate in Science – Transfer

() Track 1

() Track 2

() Accounting

() Business Management

() Criminal Justice

() Human Services

() Industrial Control Systems

() Natural Resources

() Nursing

() Office Technology

() Occupational Entrepreneurship

_____ AT (Assoc. in Technology)

() Automotive

() Carpentry

() Diesel

() Welding

US Veteran _____ Yes _____ No

Member of Phi Theta Kappa _____ Yes _____ No

Student Signature Date

Preliminary OK _____ Date _____

FOR OFFICE USE ONLY

Approved: YES _____ NO _____

Date: _____ By: _____

GPA: _____

Comments: