



APPLICATION FOR DEGREE

Admissions & Records Office, 3000 Mission College Blvd., Santa Clara, CA 95054-1897

Please Print Clearly

Print your name as it is to appear on your degree: (Print the address where you want to receive your diploma.)

Name: _____ Student ID#: _____
 First Middle Last

Address: _____ Home Phone:(_____)
 Street

_____ Other Phone:(_____)
 City State Zip

AA Major: _____

AS Major: _____

All Official Transcripts that apply to your degree must be on file in the Records Office or your *Application for Degree* will be **DENIED.**

1) Have you taken a course(s) from another institution(s)?

Yes No

2) In order to provide a prompt evaluation of your petition:

* List below all colleges previously attended and the date you requested your transcripts.

Previous college(s) attended	Name used while enrolled	Date Requested

3) List Course Substitutions: approval must have written authorization by *Major Department*

Course	School where Course(s) was taken	Substitute for Mission College course(s)	Authorized Signature

4) How did you meet the Reading proficiency requirement?

Reading Placement Test
 Reading 53 Course

5) Do you believe you have a 4.00 GPA?

Yes No

6) If you're an INTERNATIONAL STUDENT, this application **MUST** be signed by a DSO (Designated School Official):

DSO (Print Name): _____

DSO Signature: _____

Date: _____

Student Signature: _____

Date: _____

(I have read & filled out this form completely.)

