COLLEGE OF THE CANYONS

Petition for Associate Degree

Check one (Note: Winter is not a graduating term):

_____ Fall _____ Spring _____ Summer* Year _____

*Summer petitions are due by April 1st for name to appear in commencement pamphlet. Please check the student calendar for term specific submission deadlines.

Print name exactly as you would like it to appear on your diploma (40 characters maximum):
First / **Middle** / **Last**

E-mail: _____@my.canyons.edu__   Phone: (___) ____ - _____

Student ID #: _____   Date of Birth: ____/____/_____

College of the Canyons Major (Note: For students electing to receive multiple degrees, please list them on the same form)
MAJOR and CODE: MAJOR and CODE: MAJOR and CODE: MAJOR and CODE:

Please complete the following:

If available, would you like to receive a Certificate for the program above? ☐ Yes, Code_____   ☐ No

Are you currently enrolled in another college? ☐ Yes ☐ No

Tell us about your next step.
 Check all that apply: ☐ Transfer ☐ Secure a Job ☐ Continue at COC ☐ Other_____

Do you want to be contacted by the Career Center regarding employment services? ☐ Yes ☐ No

If this is your last semester with College of the Canyons, would you like to have your registration date moved earlier for the upcoming term? Note: This option can only be used **once**. ☐ Yes ☐ No

List courses you are currently enrolled in and/or courses still needed for your degree(s):

_____   _____   _____   _____

_____   _____   _____   _____

I request that my name be placed on the list of candidates for graduation. I understand that all requirements must be verified as met after the term ends. Processing time for my degree to post to my transcript and for my diploma to be mailed to the address on file will be approximately 3 months.

STUDENT SIGNATURE: _____   DATE: _____

Counselor/ Program Advisor Signature: _____   DATE: _____

CATALOG YEAR: _____   I certify that the catalog year written is correct: Initial: _____

NOTES:_____

_____

_____