

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
- _____ ABDT (Assoc. in Business Direct Transfer)
- _____ Associate in Pre-Nursing – DTA/MRP
- _____ Associate in Science – Transfer
 - () Track 1
 - () Track 2
- _____ AT (Assoc. in Technology)
 - () Automotive
 - () Carpentry
 - () Diesel
 - () Welding
- _____ AGS (Associate in General Studies)
- _____ AS (Associate in Science) _____
Major Field
- _____ AAS (Assoc. in Applied Science)
 - () Accounting
 - () Business Management
 - () Criminal Justice
 - () Human Services
 - () Industrial Control Systems
 - () Natural Resources
 - () Nursing
 - () Office Technology
 - () Occupational Entrepreneurship

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: