

# Cleveland State Community College Intent to Graduate Form

**Instructions:**

1. Complete top portion of form only.
2. File form at least a semester before you expect to graduate.
3. Leave form with Graduation Coordinator in the Admissions and Records Office.

**Print clearly your name as you wish it to appear on your diploma.**

Name \_\_\_\_\_  
First Middle Last

Social Security No. \_\_\_\_\_  Male  Female Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip Code

Degree:  A.A.S.  A.S.  A.A.  Certificate Major \_\_\_\_\_ Catalog Year \_\_\_\_\_

Phi Theta Kappa Member:  Yes  No Graduation Term:  Fall  Spring  Summer

Student Signature \_\_\_\_\_

*Note: Participation in Spring Commencement Exercises is required.*

**(Do not write below this line.)**

**Courses needed to complete requirements for degree/certificate**

Courses in Progress

Courses to be taken


Required Testing \_\_\_\_\_ CSCC G.P.A. \_\_\_\_\_

Date \_\_\_\_\_ Graduation Coordinator \_\_\_\_\_

**Please secure the first three signatures before returning to Admissions and Records Office:**

Advisor \_\_\_\_\_  
 Business Office \_\_\_\_\_  
 Bookstore \_\_\_\_\_  
 Admissions and Records \_\_\_\_\_

<b>Office Use Only:</b>	Diploma Ordered _____	Diploma Received _____
	Exit Exam Completed _____	Honors Received _____
	Degree Completion Date _____	Degree Awarded _____
	Recorded on Transcript _____	Program _____