



Application for Graduation – Associate Degree Programs
RETURN COMPLETED FORM TO RECORDS OFFICE – Room 103, 1st Floor Welcome Center
Or email to enrollment@sc4.edu

Date: _____ Phone Number: _____ Catalog year* _____

 Print name the way you want it on your diploma in upper and lower case

 Student number or Social Security Number

 Address where the diploma is to be mailed**

December 20____ May 20____
 August 20____

 City, State, ZIP

 Preferred E-mail Address

*To be followed when evaluating your degree requirements. Please direct questions about your catalog year to the Records Office at (810) 989-5500.
 **Provide address that is valid for diploma time frame: May graduates = diploma mailed in July;
 August graduates = diploma mailed in October; December graduates = diploma mailed in March

Please check (✓) appropriate degree. One degree per application.
TRANSFER DEGREES

Arts (AATLA) Science (ASTSC) General Education (AGEGE) Business (ABTGB) Engineering (AETGE)

APPLIED ARTS AND SCIENCE

- | | |
|---|--|
| <input type="checkbox"/> Accounting (AASAC) | <input type="checkbox"/> Graphic Design (AASGD) |
| <input type="checkbox"/> Allied Health (AASAH) | <input type="checkbox"/> Management (AASMN) |
| <input type="checkbox"/> Business, General (AASGB) | <input type="checkbox"/> Marketing (AASMK) |
| <input type="checkbox"/> Computer Information Systems (AASIS) | <input type="checkbox"/> Nursing (AASRN or AASNT) |
| <input type="checkbox"/> Criminal Justice Generalist (AASCG) | <input type="checkbox"/> Programming (AASPR) |
| <input type="checkbox"/> Engineering Technology | <input type="checkbox"/> Radiologic Technology (AASRD) |
| <input type="checkbox"/> Electronics (AASER) | <input type="checkbox"/> Respiratory Therapy (AASRP) |
| <input type="checkbox"/> Engineering Graphics/CAD (AASEG) | <input type="checkbox"/> Software Development (AASDV) |
| <input type="checkbox"/> Mechatronics (AASEM) | <input type="checkbox"/> Therapeutic Massage (AASTM) |
| <input type="checkbox"/> Precision Machining (AASEP) | <input type="checkbox"/> Other* _____ |
| <input type="checkbox"/> Welding and Fabricating (AASEW) | |

*For associate programs that are no longer active

FOR OFFICE USE ONLY	GPA _____	CL	MC	SC	MA/MTA	PTK
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