

1)

2)

3)

Student signature:____

Residency _____ C/P__

Transcript process date _____

Term Completed ___

Florida Gateway College **Graduation Application**

(PLEASE PRINT CLEARLY)

To	Note: Name will ap	Stud	lent I.D. Number a as reflected on y current address of	record on file with	c records. h FGC.	
First	Middle			Last		
Circle the term of expec	cted graduation:	Fall Spring	Summer A	Summer B/C	Yea	ur
Will you participate in	the graduation cere	emony? Circle	One: Yes	No		
Summer Graduates Onl	y: Circle One:	Spring Cerem	ony Fall Ce	remony		
Please circle the degree, degree) or Major (BS/B have the degree declare	AS, AS, AAS, AT	D, or Certificat	e). A separate ap			
(Circle one): B and indicate the follow	S/BAS AA	AS	AAS	ATD	Certificate	
AA only: Courses of or	O				_and Code	
BS/BAS, AS, AAS, AT	D, or Certificate: N	/lajor			_and Code	
Enter courses you will t Indicate if you will be ta (If yes, include name of	ake your last term. aking any of the co	ourse(s) as a trai	nsient student at a	nother institution:	: Circle YES	NO
Note: Official transcri						application.
In addition to the course	s listed above, the	following degre	ee requirements n	nust be completed:	:	
Upon award of a degree major from which you a after your graduation. T enrolled in classes in the assistance with the chan	re graduating is the This could impact a te term following gr	e only major or any financial aid raduation. If yo	n your record, it w	vill be changed to	non-degree effecti	ve the term
Advisor Certification: determined that the stude courses and other require	ent will meet all re	quirements by t	student's declare he term listed abo	d major/courses of ove, contingent up	f study with him/he on successful com	er and have pletion of the
Advisor signature:				Date		
Student Certification: requirements necessary completed by the end of required for the term in consent to all publicity a	to graduate or com the term noted on which all requirem	plete my degree this graduation ents will be con	e by the end of the application. I und	e term listed above lerstand that a new	e. If all requiremen y graduation applic	its are not cation will be

Date_

Enrollment Services Office use only (System Flagged_

Holds _____ TABE ____ SGASTDN

Diploma Date _____ Diploma mail date ___

Rev. 11/19

INSTRUCTIONS FOR COMPLETING THE GRADUATION APPLICATION FORM

Please note the following:

- 1. Students should review their academic record with their advisor to determine that they have met, or will meet, graduation eligibility by the term indicated.
- 2. Students and advisors must sign the graduation application (items 8 & 9) attesting that the student has declared the major and met, or will meet, all graduation requirements.
- 3. The graduation application is valid only for the term shown on the application. A student who does not complete all program requirements within the term noted must submit a new graduation application for the term in which requirements will be completed.
- 4. The graduation application must be submitted to Enrollment Services (Building 15) by the designated deadline so that it can be processed. *Please refer to FGC's Academic Calendar for published deadlines*.
- 5. A student must have a completed Graduation Application on file in Enrollment Services in order to participate in the FGC Graduation Ceremony.
- 6. Please allow four to six weeks following the semester of completion for the mailing of diplomas and/or certificates.