



MacCormac College

29 East Madison Street, Chicago, IL 60602 | www.MacCormac.edu | Tel: (312) 922-1884 | Fax: (312) 922-4286

Graduation Form

Graduations are held each spring semester for all students. Students completing graduation requirements at the end of fall semester can participate in spring's graduation. Students completing graduation requirements at the end of the summer semester can participate and be awarded at the following graduation.

Students must meet the following requirements to qualify for graduation with an associate degree:

1. Completion of the stated program curriculum
2. A cumulative grade point average of 2.0 based upon hours taken at MC
3. Completion of the skill requirements of the program
4. Students with transfer credits must complete a minimum of 36 semester hours from MC
5. Fulfillment of all financial obligations to the College

Potential graduates must submit this form and make arrangements to meet with the Registrar and Financial Aid as part of graduation requirements. **The graduation fee is \$95.00 and must be paid even if you are not participating.**

Complete this form and return it to the Office of the Registrar.

Student Information

Date: _____ Social Security Number: _____

Please print your name exactly as you want it to appear on your degree.

Name: _____
First Middle Last

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ E-Mail Address: _____

The following information is collected in order to comply with federal regulations to report graduate students.

Gender: Male Female **Age:** _____

Status:

Citizen Permanent Resident Non-Resident/Other/Student Visa, type _____

Ethnicity:

- | | |
|--|--|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Asian American/Pacific Islander | <input type="checkbox"/> Non-Resident Alien |
| <input type="checkbox"/> Black, Non-Hispanic | <input type="checkbox"/> White, Non-Hispanic |
| <input type="checkbox"/> Two or more races | <input type="checkbox"/> Other/Unknown |

Graduation Information

Graduation Semester and Year:

Fall Semester _____ Spring Semester _____ Summer Semester _____

Degree:

- Associate of Science
 Associate of Applied Science (*only for Court Reporting*)

Program:

- Business Administration Criminal Justice Court Reporting
 Entrepreneurial Studies Paralegal Studies

We encourage you to participate, but please remember that you are only able to walk once. If you submit this form and your plans change, simply call the Registrar's office.

Do you plan to attend the graduation ceremony?

- Yes, I will attend
 No, I will not attend

Cap & Gown measurements: (*see the Registrar*)

Height: _____ Weight: _____ Cap size: ONE SIZE

Are you Phi Theta Kappa (PTK) member?

- Yes (*If yes, please see PTK advisor*)
 No

Student Signature: _____ Date: _____

Office Use Only

Department Signatures:

- Considered a Potential Graduate Complete Graduate

Registrar: _____ Date: _____

- Financial Aid requirements have been fulfilled

Director of Financial Aid: _____ Date: _____

- Financial obligations have been fulfilled

Dean of Finance: _____ Date: _____