



# Mount Wachusett Community College

444 Green Street, Gardner, MA 01440-1000

Office of Records

(978) 630-9270

## PETITION TO GRADUATE

(Return to the Records Office)

Have you petitioned to graduate in this same major in a prior year?  No  Yes If yes, Year \_\_\_\_\_  
Have you paid a graduation fee for the program listed below before?  Yes  No

**There is a \$25.00 fee to replace a diploma that is 3 or more years old**

This application is necessary so that the College can review your academic history, verify that all curriculum requirements have been met, and to certify your eligibility for graduation. Please list **ALL** degree and certificate programs you wish to be reviewed. Only those indicated below will be reviewed.

Expected Graduation Date: \_\_\_\_\_ May \_\_\_\_\_ August\*\* \_\_\_\_\_ December\*\*\*  
(See reverse for diploma order processing information)

Name – Print **EXACTLY** as you wish your name to appear on the Diploma:  
(The name used on the college records will be used unless official documents are presented stating otherwise.)

\_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Last  
Student ID Number: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Curriculum(s) in which you intend to graduate:

	Degree	Certificate
	(check appropriate column)	
_____	_____	_____
_____	_____	_____

Do you have transfer credit from another college?  Yes  No

If, "Yes", list college(s): \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*August graduates** will be allowed to participate in the May graduation exercises. Students determined ineligible for May graduation will be offered the August graduation if the needed courses can be completed. If you are petitioning for August graduation, please indicate the course(s) you will be completing in the summer:

\_\_\_\_\_

**\*\*\* December graduates** will be invited to participate in the graduation exercises at the end of that academic year.

