

OFFICE USE ONLY:

DATE RECEIVED: _____ INITIALS: _____

TERM: _____ PROG: _____

STATUS: _____ GPA: _____

PYMT: _____ NOTES: _____

**OLYMPIC COLLEGE**

Registration & Records | Enrollment Services
1600 Chester Ave | Bremerton, WA 98337
evaluators@olympic.edu

CERTIFICATE APPLICATION**STUDENT INFORMATION:**_____
Print or Type Your Name

Your printed diploma will have your Primary Name as listed in ctcLink. If you would like a different name on your diploma, please follow the instructions listed in our Graduation webpage: <https://www.olympic.edu/student-life-support/enrollment-services/graduation>

ctcLink ID Number: _____ **Email Address:** _____
Preferred email address to receive correspondence regarding graduation application.

IMPORTANT INFORMATION:

- ✓ Meet with a Student Success Coach or Faculty Advisor prior to submitting this form
<https://www.olympic.edu/student-life-support/enrollment-services/advising/make-advising-appointment>
- ✓ Check current graduation application deadline: <https://www.olympic.edu/student-life-support/enrollment-services/important-dates-deadlines>
- ✓ Update mailing address and contact information, if necessary, by visiting your Student Homepage in ctcLink. Diplomas will be mailed to the address on file.
- ✓ Application fee are non-refundable: \$20 for first certificate
\$10 each additional in the same term OR \$20 if not in the same term.
- ✓ Check our Graduation Webpage for more information. <https://www.olympic.edu/student-life-support/enrollment-services/graduation>

DEGREE CHOICE, CATALOG YEAR AND TERM COMPLETION:

Catalog Year: _____ Students may graduate under the current catalog or any of the past seven years' catalogs, if they were enrolled during the time the catalog was in effect. See policy here: <https://catalog.olympic.edu/content.php?catoid=7&navoid=218>.

Graduation Term Completion: Check catalog for current deadlines: <https://www.olympic.edu/student-life-support/enrollment-services/important-dates-deadlines>

Summer

Fall

Winter

Spring

Certificate of Completion: _____

Certificate of Proficiency: _____

Certificate of Recognition: _____

Certificate of Specialization: _____

ACKNOWLEDGEMENT AND SIGNATURES:

I understand that I am responsible for ensuring that I have met all of the requirements for the degree indicated above.

Date: _____ Student Signature: _____

Program Advisor Signature is required for all certificate applications.

Date: _____ Program Advisor Signature: _____