OF	FICE USE ONLY:			
DATE RECEIVED: INITIALS:		LS:		
	PROG:			
	GPA:		Registration & Records   Enrollment Services	
PYMT:	NOTES:		1600 Chester Ave   Bremerton, WA 98337 evaluators@olympic.edu	
	CERTIF	ICATE A	APPLICATION	
STUDENT INF	ORMATION:			
		Print or Type Y	our Name	
			If you would like a different name on your diploma, please follow s://www.olympic.edu/current-students/graduation	
ctcLink ID Number:	ctcLink ID Number:     Email Address:       Preferred email address to receive correspondence regarding graduation application.			
IMPORTANT	NFORMATION:			
deadlines  ✓ Update mailing address on file ✓ Application fee are n  ✓ Check our Graduatio  DEGREE CHOI	ess and contact information, i e. on-refundable: \$20 for first co \$10 each addi n Webpage for more informa CE, CATALOG YEAR	if necessary, by vertificate itional in the same tion. https://www.canton.canton.https://www.canton.canton.https://www.canton.https://www.canton.canton.https://www.canton.canton.https://www.canton.c	pic.edu/current-students/admissions/academic-dates-and- visiting your Student Homepage in ctcLink. Diplomas will be mailed the term OR \$20 if not in the same term. Tww.olympic.edu/current-students/graduation.  M COMPLETION: Int catalog or any of the past seven years' catalogs, if they were	
enrolled during the time t	he catalog was in effect. See ¡	policy here: https	s://catalog.olympic.edu/content.php?catoid=7&navoid=218.	
Graduation Term Compled dates-and-deadlines.	tion: Check catalog for curre Summer Fall	nt deadlines: <u>htt</u> Winter	ps://www.olympic.edu/current-students/admissions/academic- Spring	
Certifi	cate of Comple	etion:		
Certifi	cate of Proficie	ency:		
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## 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.

Program Advisor Signature:

REVISED 09.15.2022

Date: