Application for
Degree / Diploma / Certificate

WAKE TECH
COMMUNITY COLLEGE

Student ID Number

Date of Birth

Print your name in the boxes below as you want it to appear on your Degree/Diploma/Certificate.

FIRST NAME	MIDDLE NAME **OR** INITIAL	LAST NAME

Daytime Phone Number

Alternate Phone Number

Are you applying for multiple programs?　☐ Yes　☐ No　If yes, complete an application for each program.

Print complete Curriculum Title and Number *(Example: Associate in Arts – A10100)*

☐ Degree　☐ Diploma　☐ Certificate

Curriculum Title and Number can be found in Self – Service

Check the semester that you will **complete** program requirements and indicate year.

☐ Fall　☐ Spring　☐ Summer　Year _____

If you plan to participate in the graduation ceremony you MUST complete a cap and gown order by posted deadline
http://www.waketech.edu/student-services/registration-student-records/graduation

Student Signature

Date

Office Use Only		
Received by:	Date Received:	
Invoiced MCRG: ☐ Yes　Paid: ☐ Yes	Code STMC:	Recode:
Diplomas on Demand:	Reviewed:	
Program List:	Posted:	