

Reid State Technical College

Intent to Graduate

Today's Date

Student Number

Complete Form

Meet with Advisor

Take form to Building 400 – Registrar or Assistant to Registrar

(A separate form is required for each award you are requesting)

(Please PRINT Clearly)

Student's Name _____

(Legal Student Name will be printed on Diploma as listed on academic software)

Email _____

*Provide email address that you check often

Address _____

City _____

State _____

Zip _____

Signature _____

Cell Number _____

My signature indicates and I acknowledge I am required to:

1. Complete all degree requirements prior to the scheduled graduation date.
2. Furnish transcripts, if necessary, prior to the scheduled graduation date.
3. Order a cap and gown by set deadline if I wish to participate in the graduation ceremony.
4. File another intent to graduate form if I do not graduate as now scheduled.

Expected Completion: ___ **Fall (December)** ___ **Spring (May)** ___ **Summer (August)** ___ **of Year:** _____

I am applying for: Please indicate program on line provided.

- Associate in Applied Technology _____
- Certificate (CER) _____
- Short Term Certificate (STC) _____
- Associate in Occupational Technology (AOT) _____

Do you plan to participate in the May Commencement Ceremony? ___ **Yes** ___ **No**

I understand that it is my responsibility to obtain updated graduation information from the Registrar's office at Reid State Technical College. I understand that I must notify the Registrar's office (in writing) of any changes to the information I have provided above. I also understand that if I do not graduate in the term applied, I must reapply (in writing) for graduation in a subsequent term. By submitting this application, I hereby affirm that all information supplied for graduation is complete and accurate.

Advisor Signature

Your signature certifies that this student meets the requirements established for graduation.

Advisor Signature _____

Date _____

Placement Information

Are you currently employed? Yes No

Name and Address of Current employer: _____
(Company Name)

(Address)

(City) (State) (Zip Code)

What is your position/title? _____

Is this position related to the training you received at Reid State? Yes No

Will you remain in your current position after graduation? Yes No

If not, will you seek employment elsewhere after graduation? Yes No

Have you already found a new position? Yes No

If yes, what will your new position be? _____

If yes, where will you be employed? _____
(Company Name)

(Address)

(City) (State) (Zip Code)

Will your new position be related to your field of study at RSTC? Yes No

What will be your approximate hourly wage for this position? _____

Additional Information

Ethnic Origin: Hispanic/Latino
 American Indian/Alaska Native Asian
 Asian
 Black/African American
 Native Hawaiian/Other Pacific Islander
 White
 Two or More Races

Male Female

For Office Use Only
Received by _____
Date _____