

If you have questions about completing this form, please call 361-698-1248. Please submit the completed form to the Office of the Registrar, Del Mar College, in the Harvin Center–Room 270, or at the Coleman Center–Room 128.



# Graduation Application

Name (please print): \_\_\_\_\_ Phone: \_\_\_\_\_

Student ID or Date of Birth:

Semester and year you completed or will complete your program

Fall     Spring     Summer    Year: 20 \_\_\_\_\_

Mailing address for diploma: \_\_\_\_\_

Street Address

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City                                  State                                  Zip

\*\*\*If the above address is different than your WebDMC, this form will act as a change of address for your mailing address only\*\*\*

**\* \* Graduation applications must include a system generated academic evaluation for each credential signed by your academic advisor. \* \***

Please select the appropriate choice below:

- I have completed all the program requirements (or am enrolled in my final semester) for an award.
- I have attended a four year institution and will have my credits transferred (Reverse Credit Transfer).

INDICATE THE MAJOR CODE AND AWARD LEVEL FOR WHICH THE REQUIREMENTS HAVE BEEN MET USE A SEPARATE LINE FOR EACH AWARD	
Major Code	Award Level
Ex: BUAD, CRIJ, LIBA, OTA	Ex: AA, AS, AAT, AAS, CER1, CER2, OSA

**IMPORTANT**

- All email correspondence will be sent to your WebDMC email account.
- By submitting this form, I understand participation in commencement does not ensure graduation from Del Mar College.
- Successful completion of program requirements is required for graduation from Del Mar College.
- Evaluation of requirements will begin after final grades are posted for the term.
- Students must have an accumulative GPA of 2.0 in order to graduate.
- Students must have completed 25% of their degree requirement from Del Mar College.
- All subsequent degrees must differ from prior degree by 20% of the required semester hours.
- If requirements are met, you will receive your diploma 6 – 8 weeks

- I will     I will not    Participate in the Commencement Ceremony – *By selecting "I will", you confirm that you are requesting to participate in the ceremony, whether in person or virtual*
- I do     I do not    Want my name in printed materials for commencement
- I do     I do not    Require special accommodations during the ceremony. *(You will be contacted by our office with further instructions.)*
- I am     I am not    A member of the US Armed Forces. If yes, select one: \_\_\_\_ Veteran    \_\_\_\_ Active Duty

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once submitted, email all changes to [graduation@delmar.edu](mailto:graduation@delmar.edu).  
Please ensure that all transcripts from other schools arrive to the Student Enrollment Center before the end of the term to be considered.

**Registrar Office Use Only**

PERC \_\_\_\_\_ Mailing Address Changed \_\_\_\_\_ SACP \_\_\_\_\_ SGRD \_\_\_\_\_ Date Entered \_\_\_\_\_ Tech Initials \_\_\_\_\_