

APPLICATION FOR ASSOCIATES DEGREE

DEGREE APPLICATIONS ARE DUE AT THE BEGINNING OF YOUR LAST QUARTER.

PRINT NAME AS YOU WISH IT TO APPEAR ON	DIPLOMA (First, Middle, Last)	ctcLink ID (Required)
(Only name that is listed in ctcLink may be	used)	
Notification regarding degree status will be s	sent to the students TCC e-mail address.	Telephone Number
I am applying for the following degree(s) for the	ne (Quarter, Year)	
 (Select all that apply) Associate in Arts (DTA) Associate of Arts in Biology Associate of Arts in Business Associate of Arts in Computer Science Associate of Music Associate of Arts in Pre-Nursing 	 Associate of Science Track 1 with Associate of Science Track 2 with Associate of Science in Bioengineerir Associate of Science in Civil and Mec Associate of Science in Electrical and Associate of Science in Materials Science 	hanical Engineering Computer Engineering
 Associate in General Studies Associate in Applied Sciences - Program: 		
I am over 16 or a running start student that school diploma along with my Associate's degree	at has <u>never</u> earned a high school diploma a ree.	nd would like to receive a hig
Yes, I plan to continue taking courses at Ta	acoma Community College after earning th	is degree.

Colleges attended other than TCC:

D Physical Education Requirement Waived: Email Confirmation from Physical Education Department Chair Included

I understand that the final responsibility for ensuring that I have met all of the requirements for the degree for which I am applying rests with me.

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Student's Signature

Academic Advisor, Department Chair or Department Faculty Signature

Advisor Comments:

PLEASE NOTE: Email completed degree application to your advisor.

We would love to hear from you! Please tell us about your TCC experience by scanning this QR code and completing a short survey.



EVALUATION OFFICE USE ONLY
QUARTER:
DEGREE:
HONORS: