

PETITION FOR DEGREE OR CERTIFICATE

RECORDS OFFICE

- Complete this petition and submit to the Records Office.
- Complete a separate petition for each program (degree/certificate) being sought.
- This petition does not constitute final approval for graduation.

Last Name

First Name

Student ID or Date of Birth

Terra Email

Phone Number

DEGREE/CERTIFICATE INFORMATION

Name to be printed on degree/certificate: _____
First Middle Last

Expected term of completion: ☐ Summer ☐ Fall ☐ Spring Year: _____

Program: ☐ Associate of Arts (AA) ☐ Associate of Individualized Study (AIS)*
(Check One) ☐ Associate of Science (AS) ☐ Associate of Technical Study (ATS)*
☐ Associate of Applied Business (AAB) *AIS/ATS degrees must have agreement on file in Records
☐ Associate of Applied Science (AAS) ☐ Certificate

Major/Certificate title: _____

WITHDRAW PETITION

Applied term of completion: ☐ Summer ☐ Fall ☐ Spring Year: _____

Major/Certificate title to be removed: _____

AUTHORIZATION

I hereby authorize Terra State Community College to revise my student record as indicated above.

Student signature: _____ **Date:** _____

Do not mark below this line. For administrative use only.

VERIFICATION:

Comments: _____

Records official signature _____ Date _____