



# REQUEST FOR DEGREE OR CERTIFICATE

**OFFICE USE ONLY:**  
 \_\_\_\_\_ SHADEGR  
 \_\_\_\_\_ BDMS  
 \_\_\_\_\_ DD 214

3000 Campus Hill Drive, Livermore CA 94551 Admissions & Records Office Fax (925) 606-6437

Anticipated Completion:  SPRING     SUMMER     FALL    Year: 20 \_\_\_\_\_

SSN/"W" User ID: W \_\_\_\_\_

\*Name: \_\_\_\_\_  
                         First    Middle/Maiden    Last

\*Address: \_\_\_\_\_  
                         Street    City    State    Zip

Phone: \_\_\_\_\_                                  Email: \_\_\_\_\_  
                         Home    Work

\*Your name and permanent address as currently listed in the College's student information system will be used to print on your diploma. Any changes to either your name or address must be made by completing a Student Data Change Form available at Admissions & Records Office or website.

*Please contact the counseling department or consult with your Academic counselor with any questions pertaining to your degree and/or certificate major.*

Indicate which of the following you are petitioning for. You will need to submit a petition for each degree/certificate that you are planning to complete

Catalog Year: \_\_\_\_\_ (If item is left blank or not appropriate, current catalog will be used.)

- Associate in Arts Major: \_\_\_\_\_
- Associate in Science Major: \_\_\_\_\_
- Certificate of Achievement Major: \_\_\_\_\_
- Associate in Arts Transfer Major: \_\_\_\_\_
  - CSU IGETC Pattern                                   CSU GE Breadth Pattern
- Associate in Science Transfer Major: \_\_\_\_\_
  - CSU IGETC Pattern                                   CSU GE Breadth Pattern

- Submitted official copies of your transcripts (high school and college) from ALL other previously attended accredited post-secondary institutions.
- Advanced Placement (AP)/International Baccalaureate (IB) Exam and/or Course Substitutions/Waivers forms are on file if applicable.
- Veterans only: DD-214 on file and verified by VA Coordinator/Designee.

**Student Signature:** \_\_\_\_\_                                  **Date** \_\_\_\_\_

By signing above, I certify that my application is complete and accurate. I am responsible for knowing the information provided.

**IMPORTANT:** If you do not complete your requirements in the current academic semester, you must re-apply. Please allow 8-12 weeks for a response.