



COAHOMA COMMUNITY COLLEGE

APPLICATION FOR DEGREE

*Application should be submitted by the student to the Registrar
one semester prior to completing degree requirements.*

Print First and Last Name Only _____

Student Identification (ID) Number _____

Gender:

Female Male

Career

Technical

Degree

Certificate

Certificate

Major Concentration: _____

List all other institutions you have attended: _____

Date of Catalog issue listing you have attended: _____

Month and year you expect to complete degree requirement: _____

Information needed for commencement exercises: (Graduation fees are non-refundable)

Fees must be paid whether or not the student participates in the commencement exercises.

Are you participating in the commencement ceremony? Yes No

Cap / Gown Measurements: Height: _____ Weight: _____

Your mailing address/P. O. Box: _____

City

State

Zip Code

E-Mail Address: _____ Telephone: _____

Student's Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____

Dean's Signature: _____ Date: _____

What are your career plans? Work Further college If so, where? _____

Date Received in Admissions Office: _____ Received By: _____

NON-DISCRIMINATION STATEMENT: Coahoma Community College is an equal opportunity institution in accordance with civil rights and does not discriminate on the basis of race, color, national origin, sex, disability, age, or other factors prohibited by law in any of its educational programs, activities, and employment opportunities. The following person has been designated to handle inquiries regarding the non-discrimination policies: Wanda G. Holmes, Director of Human Resources/Coordinator for 504/ADA, Title IX Compliance Officer, Office #A100, Vivian M. Presley Administration Building, 3240 Friars Point Road, Clarksdale, Mississippi 38614; Phone: (662) 621-4853, Email: wholmes@coahomacc.edu