

Niiwin Akeaa Campus
111 Beartown Road
Baraga, MI 49908
Phone: (906) 353-4630
Fax: (906) 353-8107



Wabanung Campus
770 N. Main St.
L'Anse, MI 49946
Phone: (906) 524-8311
Fax: (906) 524-8106

GRADUATION APPLICATION

Full Legal Name: _____ Student ID _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Birthdate: _____ Email: _____

MAIL MY DIPLOMA/CERTIFICATE TO: (If different from above)

Street _____ City _____ State _____ Zip Code _____

Associate of Arts Degree in

- ___ Anishinaabe Studies
- ___ Liberal Studies
- ___ Liberal Studies/Art Emphasis
- ___ Liberal Studies/Criminal Justice Emphasis
- ___ Liberal Studies/Health Sciences Emphasis
- ___ Liberal Studies/Social Science Emphasis

Associate of Science in

- ___ Business Administration
- ___ Early Childhood Education
- ___ Environmental Science
- ___ Environmental Science/
Sustainability Emphasis

Certificate in

- ___ Business Administration
- ___ Child Development
- ___ Criminal Justice
- ___ Culinary Arts
- ___ Environmental Science
- ___ Environmental Studies/Sustainability
- ___ Office Services
- ___ Small Business Start Up
- ___ Tribal Management

Semester and year of coursework completion: Fall 20____ Spring 20____ Summer 20____

NOTE: If you fail to complete your graduation requirements by the semester indicated, you must file a new application for your next anticipated completion semester.

Which catalog year have you followed to complete your program requirements? _____

I have transfer credits from: _____

Degrees I have previously earned at KBOCC: _____

Student Signature: _____

I have reviewed this student's academic record and verify that he/she will have completed the specified program requirements by the end of the semester indicated above.

Advisor's Signature

Please attach supporting information including approved course substitutions, waivers and/or departmental recommendations

Associate Degree Graduates: Complete this section **ONLY** if you plan to participate in the graduation ceremony

Check One: Male Female _____ Height (with shoes/heels): _____

Intend to wear (check one): gown, or own regalia

Approved: (date) _____ Rejected: (date) _____ Hold: (date) _____

Signed: _____ Date: _____

Diploma Mailed: (date & initial) _____