WTMC
Transforming Education
Transforming Lives

Washtenaw Technical Middle College
Graduation/Diploma Form

Personal Information

_____
Today's date

1. Please print your name as you wish it to appear on the diploma:

_____/____/____/____/____/____/____/____/____/____/____/____/____/____/____/____/____/____
First name

____/____./____/____/____/____/____/____/____/____/____/_____/_____/_____/____/_____
Middle name

____/____./____/____/____/____/____/____/____/____/____/_____/_____/_____/____/_____
Last name

Street address_____

City _____ State_____ Zip Code_____

Telephone _____

Please check all of the following that apply:

I am expecting to qualify for WTMC graduation in ____ December _____
____ May _____

Parent/Guardian Understanding and Agreement

As the parent/guardian of the above named student, I understand and agree to the following conditions:

- Participation in Commencement is dependent upon completing all requirements by the specified time
- Our son/daughter must pay all fines, fees, dues, etc. owed to WTMC or WCC before he/she will be issued a cap and gown
- We agree to pay for ($35.00 is the expected cost) the cap and gown and understand that our son/daughter will be able to keep them after commencement
- We have provided accurate information to the school regarding credits earned at other institutions and will take steps to clarify any problems that occur as a result of interpretation of credits from other schools attended
- We have checked the information provided above and it is correct.

Parent/guardian signature _____