

WHITE MOUNTAINS COMMUNITY COLLEGE
2020 Riverside Drive, Berlin, New Hampshire 03570

INTENT TO GRADUATE

I request consideration of my candidacy for a _____degree or _____certificate with a major in _____

I understand that, in order to receive this, I must successfully complete all required coursework and attain a 2.0 minimum cumulative grade point average.

_____ I will _____ I will not participate in commencement.

I also understand there is a graduation fee of \$75 which must be paid prior to receiving my degree/diploma/certificate whether or not I participate in graduation. If I do not participate in graduation, my degree/diploma/certificate will be mailed to my last known home address following the date of graduation.

(The graduation fee covers all commencement activities including caps & gowns, programs, invitations, flowers, luncheon, organist, soloist, sound system, etc.)

NAME _____ ID # _____

**PRINT name exactly as you wish it to appear
on your degree/certificate**

ADDRESS: _____

DATE _____

For office use only:

_____ TSAMASS

_____ SHADEGR

_____ List