



GRADUATION CLEARANCE

Instructions: Return this completed form to the Office of the Registrar. Failure to submit it by the end of the term will cause a delay in processing your diploma or certificate.

Name: _____ LCC ID# _____

Term of Graduation ☐ Fall ☐ Spring ☐ Summer

Year of Graduation: ☐ 2020 ☐ 2021 ☐ 2022 ☐ 2023

Circle the number of certificates and/or degrees you will be receiving: **1 - 2 - 3**

Please specify the following for each program you have petitioned for:

Name of Program

Diploma Type

_____	Degree _____	Certificate _____
_____	Degree _____	Certificate _____
_____	Degree _____	Certificate _____

REQUIRED CLEARANCES

Student

Success Center: _____ Date: _____

Admissions Office: _____ Date: _____

Preschool: _____ Date: _____

Financial Aid: _____ Date: _____

Business Office: Student Account

Grad Fee Paid: ☐ YES Amount Paid: _____ Date Paid: ____/____/____

Receipt #: _____

Financial Clearance Stamp



Business Office: _____ Date: _____