



OFFICE OF THE REGISTRAR
 366 Luna Drive • Las Vegas, NM 87701
 (505) 454-5314 • (800) 588-7232 ext. 1224 • FAX (505) 454-5348 • registrar@luna.edu

Application for Credentials/ Graduation Clearance Form
Print your name neatly as you want it to appear on your diploma

A \$15, one-time, non-refundable Graduation Fee will be assessed to your student account for EACH degree/certificate which must be paid at the time this is submitted)

LCC ID#: _____ Date of Birth: _____ Graduation semester: ___ Fall ___ Spring ___ Summer 20___

(Print) _____
 (First name) (Middle) (Last)

Address where diploma will be mailed: _____

City, State & Zip Code: _____

Phone: _____ Email: _____

Catalog year: _____ 2019-2021 _____ 2022-2023

Degree/Certificate: _____ AA _____ AS _____ AAS _____ AGS _____ Certificate

Major 1: _____ Major 2: _____

****Please check off the following area if you would like to participate in the upcoming Graduation Ceremony: __ Y __N**

Student Signature: _____ Date: _____

<u>Business Office: Student Account</u>	
Admissions Office: _____	Date: _____
Financial Aid: _____	Date: _____
Fiscal Office: _____	Date _____ Grad Fee \$ _____
Receipt # _____	Financial Clearance Stamp 