

MIDDLESEX COMMUNITY COLLEGE
GRADUATION CHECKLIST
2015-2016

Deadline to Apply:
Fall: November 13th
Spring/Summer: April 15th

Graduation Year 20 _____
Year of Catalog being used _____

OPHTHALMIC MEDICAL ASSISTING

NAME (as you would like it to appear on the Diploma) @ _____
BANNER ID

STREET ADDRESS TOWN ZIP PHONE #

Please be advised that your name and academic major will be printed in the commencement brochure and your academic major will be announced at the graduation ceremony if you choose to attend. Please notify the Records Office if you **Do Not** wish your information to be printed or announced.

Other college transfer credits to be used? Yes No Are they on file at MxCC? Yes No
Are you applying for more than one degree? Yes No If yes, which curriculum? _____

GRADUATION REQUIREMENTS:

Have been met Will be met at the end of: Fall Semester Spring Semester Summer Semester

GRADE

CSC* 101 _____
OMA* 101 _____
OMA* 102 _____
OMA* 103 _____
OMA* 104 _____

QPA TO DATE _____

ADVISOR'S SIGNATURE & DATE

STUDENT'S SIGNATURE & DATE