

Middlesex Community College Accounting Technician Certificate GRADUATION CHECKLIST

2019-20 CATALOG

| Requirements  | Cr | Grade | Semester Taken |
|---|----|-------|----------------|
| <ul> <li>Choose from the following:</li> <li>ACC*100 Basic Accounting</li> <li>ACC*113 Principles of Financial Accounting</li> </ul>                    | 3  |       |                |
| <ul> <li>Choose from the following:</li> <li>ACC*113 Principles of Financial Accounting</li> <li>ACC*117 Principles of Managerial Accounting</li> </ul> | 3  |       |                |
| ACC*125: Accounting Computer Applications I   | 3  |       |                |
| <ul> <li>Choose from the following:</li> <li>BBG*294 Business Internship</li> <li>BBG*295: Co-op Work Experience 1</li> </ul>                           | 3  |       |                |
| Computer Course Elective- choose from the following:<br>O CSC*101<br>O CSA*140<br>O CST*201   | 3  |       |                |
| CSA*135: Spreadsheet Applications   | 3  |       |                |
| BBG*115: Business Software Application  | 3  |       |                |
| TOTAL CREDITS   | 21 |       |                |

## MIDDLESEX COMMUNITY COLLEGE

Deadline to Apply: Fall: December 1<sup>st</sup> Spring/Summer: April 15<sup>th</sup> GRADUATION CHECKLIST 2019-2020

Graduation Year: 20\_\_\_\_\_

Year of Catalog being used\_\_\_\_\_

## Accounting Technician Certificate

| NAME (First Name, Middle Initial/Name is optional, Last Name) |                                       |                  | @<br>BANNER ID  |
|---|---------------------------------------|------------------|---|
| STREET ADDRESS  | TOWN                                  | <br>ZIP          | PHONE#  |
| Please note: All graduation corres                            | pondence will be sent to your coll    | lege assigned em | ail.  |
| -   | iduation ceremony if you choose       |                  | ncement brochure and your academic<br>notify the Enrollment Services Office |
| Other college transfer credits to be                          | e used? Yes O No O                    |                  |   |
| From which college?   |                                       |                  |   |
| Are they on file at MxCC? Yes                                 | O No O                                |                  |   |
| Are you applying for more than on                             | e degree? Yes O No O                  |                  |   |
| If yes, which curriculum?                                     |                                       |                  |   |
| Graduation Requirements:                                      |                                       |                  |   |
|   | the end of: Fall semester $\Omega$ So | oring Semester O | Summer Semester O   |
| Have been met O Will be met at                                | the end of that semester • 5p         | •                |   |

ADVISOR'S SIGNATURE\* & DATE

STUDENT'S SIGNATURE\* & DATE

\*Typed name is acceptable for signature.

Electronic Submissions: This form must be submitted to <u>MX-Registrar@mxcc.edu</u> from student's official college email address.