

Student's Name \_\_\_\_\_ Student's ID \_\_\_\_\_

*Revised 5/1/20*



Middlesex Community College  
**Mammography Certificate**  
GRADUATION CHECKLIST

**2018-19**  
**CATALOG**

Requirements	Cr	Grade	Semester Taken
MAM*201: Principles of Mammography	4		
MAM*202: Mammography Clinical Experience	4		
<b>TOTAL CREDITS</b>	<b>8</b>		

MIDDLESEX COMMUNITY COLLEGE

Deadline to Apply:

GRADUATION CHECKLIST

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

Fall: December 1<sup>st</sup>

2018-2019

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

Spring/Summer: April 15<sup>th</sup>

Mammography Certificate

NAME (First Name, Middle Initial/Name is optional, Last Name) @ BANNER ID

STREET ADDRESS TOWN ZIP PHONE#

Please note: All graduation correspondence will be sent to your college assigned email.

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 Enrollment Services Office if you do not wish your information to be printed or announced.

Other college transfer credits to be used? Yes No

From which college? \_\_\_\_\_

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

Minimum Required GPA for Graduation is 2.0 Current GPA: \_\_\_\_\_

ADVISOR'S SIGNATURE\* & DATE

STUDENT'S SIGNATURE\* & DATE

\*Typed name is acceptable for signature.

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