Student's Name	Student's ID	Revised 6	/12	/19	)



## Middlesex Community College Ophthalmic Medical Assisting Certificate GRADUATION CHECKLIST

**2019-20 CATALOG** 

Requirements	Cr	Grade	Semester Taken
CSC*101: Intro to Computers	3		
OMA*101: Introduction to Ophthalmic Medical Assisting	3		
OMA*102: Ocular Anatomy, Physiology, and Pathology	3		
OMA*103: Ophthalmic Clinical Skills and Procedures	4		
OMA*104: Healthcare Policies and Procedures	3		
TOTAL CREDITS	16		

## MIDDLESEX COMMUNITY COLLEGE

Deadline to Apply: Fall: December 1st

## GRADUATION CHECKLIST 2019-2020

Graduation Year: 20
Year of Catalog being used

Spring/Summer: April 15th

## **Ophthalmic Medical Assisting Certificate**

			@	
NAME (First Name, Middle I	nitial/Name is optional, Last Na	me)	BANNER ID	
STREET ADDRESS	TOWN	ZIP	PHONE#	
Please note: All graduation cor	respondence will be sent to your o	college assigned em	ail.	
major will be announced at the			ncement brochure and your academic notify the Enrollment Services Office i	
Other college transfer credits t	o be used? Yes O No O			
From which college?				
Are they on file at MxCC? Y	es O No O			
Are you applying for more thar	one degree? Yes O No O			
If yes, which curriculum?				
Graduation Requirements:				
Have been met O Will be me	et at the end of: Fall semester <b>O</b>	Spring Semester O	Summer Semester O	
Minimum Required GPA for Gradu	ation is 2.0 Current GPA:	_		
ADVISOR'S SIGNATURE* & D	PATE	STUDENT'S SIGNATURE* & DATE		

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

<sup>\*</sup>Typed name is acceptable for signature.