

# Application for Graduation

## PERSONAL INFORMATION

### Student Number

\_\_\_\_\_

### Legal Name

\_\_\_\_\_

Last Name

First Name:

Middle Name (*no initials*)

### Mailing Address

\_\_\_\_\_

City

Province

Postal Code

### Telephone

\_\_\_\_\_

Cell

Other

### Email

\_\_\_\_\_

## CREDENTIAL APPLYING FOR *Refer to College of the Rockies website for program information <https://cotr.bc.ca/programs/>*

Please select the credential and enter program in the space provided:

Degree  Associate Degree  Diploma  Certificate Program: \_\_\_\_\_

When you expect to complete your program: \_\_\_\_\_

Month

Year

## DOCUMENT DELIVERY / CONVOCATION *Please select ONE option only*

**ATTENDING** the convocation ceremony.  
*\$35 grad package fee must be enclosed  
(non-refundable)*

**NOT ATTENDING** the convocation ceremony.  
*Mail documents to the above address.*

*College of the Rockies convocation ceremony information: <https://cotr.bc.ca/enrolment-services/convocation/>*

### IMPORTANT NOTE:

*Documents **will not** be released if there are outstanding fees or fines. Your credential will be printed with your legal name  
(name used in attendance during your enrolment at the College).*

**Stay connected.** [Register HERE](#) for the College of the Rockies Alumni Network or  
visit the [College of the Rockies Alumni](#) web page.

## DECLARATION

### Freedom of Information/Protection of Privacy

The College of the Rockies complies with the Freedom of Information/Protection of Privacy legislation of the Province of British Columbia. Information collected on this form is used in the normal course of College operations in accordance with this legislation.

### Please read the following before signing:

I declare that the information contained in this form is to the best of my knowledge, complete and correct. I hereby agree to comply with the rules and regulations of the College.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## REGISTRAR'S OFFICE USE ONLY

Date Received: \_\_\_\_\_

Credential Granted: \_\_\_\_\_

Received By: \_\_\_\_\_

Date Processed: \_\_\_\_\_

Grad Fee Paid: \_\_\_\_\_

Processed By: \_\_\_\_\_