Columbia State
COMMUNITY COLLEGE

REQUEST FOR TECHNICAL CERTIFICATE

[1] Instructions for completing this form:

- □you must be following a technical certificate (not a career advancement certificate) as listed in the Columbia State catalog
- □ students who are seeking an AA, AS, AST, or AAS degree must complete the "Intent to Graduate" form
- □ do NOT complete a "change of major" form - the major you list on this form becomes your new major
- □ complete EVERY ITEM or your graduation evaluation will be delayed and the form returned for completion

[2] **PRINT YOUR NAME AS YOU WANT IT TO APPEAR ON YOUR DIPLOMA**
(This is also how your name will appear in the program and be announced at the graduation ceremony should you choose to participate)

_____ _____ _____
Last Name **First Name** **Middle or Maiden Name (optional)**

[3] Social Security Number _____

[4] Mailing Address _____
STREET/APT# CITY STATE ZIP CODE

[5] Student's permanent residence (for news release & program): **CITY** _____ **STATE (or Country)** _____

[6] I will take my final courses for my certificate the semester of: Fall 20____ Spring 20____ Summer 20____

[7] Certificate you wish to receive (**mark only those that apply**):

_____ Business Management

_____ Commercial Music – Multimedia for Songwriters

_____ Commercial Performance

_____ Criminal Justice – Corrections (phase out ending June 30, 2009)

_____ Criminal Justice – Law Enforcement (phase out ending June 30, 2009)

_____ Early Childhood Education

_____ EMT - Paramedic Technical Certificate (EMT 201-221)
(DO NOT COMPLETE THIS FORM IF YOU ARE COMPLETING BASIC EMT/EMT IV)

Career Advancement Certificates - **DO NOT COMPLETE THIS FORM**
Medical Transcription - Contact the Division of Business & Technology
Office Information - Contact the Division of Business & Technology

[8] Have you previously been awarded a college certificate? __ No ___Yes, what certificate? _____

[9] Do you wish to participate in the graduation ceremony?
_____ No
_____ Yes ($25 fee required), regalia information: Height _____ Weight _____ Sex: ___male ___female

[10] If you marked "yes" on #9, submit this form with a $25 non-refundable fee to the Columbia Business Services Office or to any Columbia State location.

[11] After this form has been stamped "paid" by Business Services, submit the form to the Records Office. You will receive by mail an official graduation evaluation.

Columbia State Community College is an AA/EOE and a Tennessee Board of Regents Institution