

WOODLAND COMMUNITY COLLEGE GRADUATION PETITION

Admissions & Records
2300 East Gibson Road
Woodland, CA 95776
(530) 661-5720

Summer ____ Fall ____ Spring ____

College ID _____

Print Name Exactly as you wish your name to appear on your Diploma:

Name: _____
First Middle Last Suffix

Address City Zip Code

WCC STUDENT EMAIL _____ Phone number _____

Please indicate other colleges you attended. _____

Have you submitted your official transcripts from those colleges? _____

Catalog Rights: Indicate Catalog Year: _____

Specific MAJOR completed: Name: _____

PLEASE CIRCLE ONE GENERAL EDUCATION MAJOR (ONLY ONE DEGREE CAN BE EARNED)

SOCIAL & BEHAVIORAL SCIENCES - ASSOCIATE IN ARTS

ARTS & HUMANITIES - ASSOCIATE IN ARTS

NATURAL SCIENCE & MATHEMATICS - ASSOCIATE IN SCIENCE

FOR RECORDS OFFICE USE ONLY

Residency: _____

Units Completed: _____

Fall Units IP: _____

Spring Units IP: _____

Summer Units IP: _____

TOTAL UNITS: _____

Grade Point Average: _____

DO NOT WRITE IN THIS SECTION

A- Nat. Sci. _____

B- Soc. Sci. _____

C- Humanities _____

D1- Engl. Comp. (F05) _____

D2- Comm/AT _____

E- Elective _____

Math Comp. (F06) _____

Read. Comp. _____

Health/PE _____

Multi-Cult. _____

Grad Posted ☐

Letter ☐

Degree ☐

SACP ☐

SGRD ☐

UCAF ☐

Evaluated by: _____