



# Petition for AD-T Degree

## Solano Community College

Rec'd by: \_\_\_\_\_ Via: \_\_\_\_\_

Note to Applicant issued: Yes ☐ No ☐

**Read and Initial items 1 - 7 below before completing the petition. Check for accuracy before submitting.**

1. \_\_\_\_\_ I have met with a Counselor to confirm completion of the degree requirements. Yes ☐ No ☐
2. \_\_\_\_\_ All of my graduation requirements were completed at SCC? Yes ☐ No ☐
3. \_\_\_\_\_ To be evaluated for graduation, I understand that it is my responsibility to have all relevant official test scores, transcripts from high school and other colleges I attended on file at SCC by the application deadline.
4. \_\_\_\_\_ I am submitting/have submitted all relevant **official** transcripts from other colleges/universities attended. Yes ☐ No ☐ N/A ☐  
List other colleges attended: \_\_\_\_\_
5. \_\_\_\_\_ I have submitted course descriptions for college courses that were taken prior to 2000. Yes ☐ No ☐ N/A ☐
6. \_\_\_\_\_ I understand that all holds and fees must be cleared before my request will be completed.
7. \_\_\_\_\_ When applicable, if an analyst finds you are not eligible for the degree(s) but meet the certificate requirements, would you like to be awarded the certificate? Yes ☐ No ☐
- \*8. If the address on your permanent record does not match the address you list on this form, may we have your permission to update your record?  
Yes ☐ No ☐

<b>Degree Completion Term:</b> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> <b>Year:</b> _____	
<b>(Required) SCCID:</b> _____	<b>(Required) SSN#:</b> _____
<b>Last Name in System:</b> _____	<b>First Name in System:</b> _____ <b>MI</b> _____
<b>Date of Birth:</b> _____	<b>Phone: Area Code + #</b> _____

<b>General Education Option:</b>
Are <b>official</b> High School Transcripts, <b>Foreign Transcripts (third party evaluated)</b> , AP, ACT, or SAT test scores being used to fulfill the UC IGETC language requirement turned in to Admissions & Records? <input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Title of Degree</u>		<u>Office Use Only</u>		
Please select from the list on the back of this document		Bulletin Acad.Yr.	Awarded	Denied
<i>Please note if applying for (ADT's) list all on one form. List all other degrees on another form.</i>				
1.	ADT			
2.	ADT			
3.	ADT			
4.	ADT			
5.				
6.				

**PLEASE PRINT AND SIGN THIS FORM BEFORE HANDING IT INTO ADMISSION AND RECORDS.**

I certify that the information contained in this application is true and accurate to the best of my knowledge. I understand incomplete applications will be denied.

<b>SIGNATURE OF STUDENT:</b>		<b>FOR OFFICE USE ONLY</b>	
Entry Catalog _____	Exit Catalog _____		
Currently Enrolled: Yes <input type="checkbox"/> No <input type="checkbox"/>		Primary Computer Entries: <input type="checkbox"/> Entered in SHADEGR _____ (Initial)	
Dates of any previous diplomas _____		<u>UE</u> <u>GPA</u>	
_____	SCC _____	Honors: H1 <input type="checkbox"/> H2 <input type="checkbox"/>	
_____	Transfer _____	Posting: <input type="checkbox"/> SHAPCMP <input type="checkbox"/> SHADEGR	
_____	Total _____		
Reading requirement met/how? _____	Typed (Initial) _____	<input type="checkbox"/> Mailed or <input type="checkbox"/> Emailed (Date) _____	
P.Clip/Notes: _____			
Evaluation Proofed by: _____	Date: _____	Entered in to Banner by: _____ (Date) _____	

Rec'd By: \_\_\_\_\_ Via: \_\_\_\_\_ Date: \_\_\_\_\_

Note to Applicant issued: Yes: \_\_\_\_\_ No: \_\_\_\_\_