



ASSOCIATE DEGREE, CERTIFICATE OR TRANSFER FORM

For students who have graduated or will graduate during the following terms: Fall 2017, Spring 2018, or Summer 2018

Please fill out this form to receive an award for your accomplishments. Return it to EOPS or email it to eops@marin.edu by Friday, April 20th.

| Name | M00# |
|---|-------|
| Email address | Phone |
| Please check all that apply: | |
| ☐ Degree | |
| What degree(s) will you be receiving? (Ex: AA Humanities) | |
| ☐ Certificate What certificate will you be receiving? | |
| | |
| ☐ Transfer | |
| What college(s)/university(ies) have you been accepted to? | |
| What college/university are you planning to attend? | |
| What will your major be? | |
| Please join us for a celebration on Wednesday, May 9th from 5 pm-7pm. | |
| Yes, number of guests attending (4 max): | |
| □ No | |
| Please share something about your educational/personal journey that we can share at the ceremony. What are you looking forward to after you leave COM? What are your eventual career goals? | |
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