GRADUATION APPLICATION
General Instructions

Office of the Registrar

HORRY GEORGETOWN TECHNICAL COLLEGE

www.HGTC.edu

IMPORTANT DATES

Fall Semester Deadline - October 1 • Spring Semester Deadline - March 1• Summer Semester Deadline - June 1

There is only one marching ceremony per year which is held in May

Applicants that are finished in December or who will finish in May or August are welcome to participate.

APPLICATION PROCESS

Complete a Graduation Application, meet with your Advisor to review your Degree Works Audit to verify completion of your courses. Bring the information to the Registrar's Office. All candidates for degrees, diplomas, or certificates, to be awarded in a current academic year must file a formal application with the Registrar. Any candidate applying for more than one degree, diploma, or certificate must submit an additional application.

DIPLOMA MAILING ADDRESS

If any information on your application changes such as name, address or marching status, it is your responsibility to notify the Registrar's Office as soon as possible.

TO BE ELIGIBLE FOR GRADUATION

You must: complete all courses required for your program as well as meet the minimum grade requirements; have at least a 2.00 GPA in all courses required for your program; complete 25% of the program required hours at HGTC; and have no outstanding account balance with the college. If you plan to continue taking classes after you graduate, you must complete a Major Change Form with the Admissions Office.

GRADUATION ANNOUNCEMENTS, CAPS AND GOWNS

Information regarding caps, gowns and announcements will be availabe at a later date.

TO GRADUATE WITH HONORS

Honors will be calculated based on the courses required for your major.
4.0 GPA for their program will be recognized as Summa Cum Laude,
3.75-3.99, Magna Cum Laude, and 3.50-3.749 Cum Laude.

PO Box 261966 . Conway, South Carolina . 29526
Registrar@hgtc.edu . Phone: 843-349-5285 . Fax: 843-234-2213

Revision Date: 12-Jan-2017

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All candidates applying for more than one degree, diploma, or certificate must submit an application for each.

PLEASE PRINT CLEARLY

College ID (H#)_____ **Phonetic Spelling of Name** (if difficult to pronounce): _____

Name_____ _____ _____ _____

Legal Last Name | Legal First Name | Legal Middle Name | (Suffix - Jr., II, III, etc.)

SPECIAL NOTE: The name listed on your **academic records** is the name that will appear on your diploma. If incorrect, a Name Change Form must be completed at the Registrar's Office, along with a copy of your social security card for proof of name change.

Address_____ _____ _____ _____

Street or PO Box | City | State | Zip

SPECIAL NOTE: The address currently listed on your **academic records** is where your diploma will be mailed. If this information is incorrect, make address change through your WaveNet Account.

Permanent phone ( )_____ Present daytime/work phone ( ) _____

Area Code | Phone | Area Code | Phone

Personal e-mail address _____

Major _____ Conc1 _____ Conc2 _____

What is your last anticipated term of attendance? Fall ___ Spring ___ Summer ___

Do you plan to participate in the May Commencement Ceremony? Yes ___ No ___

****

Do you receive Financial Aid: _____ YES _____ NO Are you a Veteran: _____ YES _____ NO

Are you continuing your education at HGTC after your program completion: _____ YES _____ NO

Have you completed a change of major in the Admissions Office: _____ YES _____ NO

What is your new major: _____?

By not changing and identifying your new major, you will lose your Financial Aid funding!

****

I certify that all statements answered on this application are true and complete to the best of my knowledge.

Signature_____ Date _____/_____/_____

STATEMENT OF EQUAL OPPORTUNITY

Horry Georgetown Technical College shall not discriminate in employment or personnel decisions, or in all other segments of the College community on the basis of race, sex, age, national or ethnic origin, religion, disability, ancestry, political affiliation, marital status, or unfavorable discharge from military service, in the educational programs and activities which it operates, and the College is prohibited from discrimination in such a manner by applicable law.

For Registrar's Office Use Only

Sequence #:_____ Term:_____ Term Date:_____

Major:_____ Conc1:_____ Conc2:_____

GPA: _____ Honors: C M S P T Certified: _____

PrintServices:_____ Mailed/Given/Holds:_____

Notes: _____ Name Card: _____

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Each year, Horry Georgetown Technical College, with assistance from the Office of Institutional Research and Assessment, is required to report various statistics regarding graduate and placement information in order to maintain each program's viability at HGTC including, but not limited to, Program Evaluations. The following information is needed in order for the College to accomplish these reporting requirements. Therefore, please complete the following information to the best of your knowledge. This portion of the Graduation Application will be forwarded to the Office of Institutional Research and Assessment. **As a reminder**, the application is not considered complete unless **all** sections have been completed. Please print all information. Thank you!

Applicant's College ID (H#) _____ **Personal Email Address**:_____

Name _____ _____ _____ _____
Legal Last Name | Legal First Name | Legal Middle Name | (Suffix-Jr., II, etc.)

Major (example-ACC3)**:** _____ **Graduation Date or Term:**_____

Concentration: _____

GRADUATE SATISFACTION EXIT QUESTIONNAIRE: HOW DID WE DO?

The following is a list of services provided by Horry Georgetown Technical College. Please indicate your level of satisfaction for each item and add any comments on the reverse side. (Use additional sheets if necessary.)

	Very Satisfied	Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Dissatisfied	Very Dissatisfied	N/A or Did Not Use
A. HGTC Service Areas:							
Admissions	☐	☐	☐	☐	☐	☐	☐
Bookstore	☐	☐	☐	☐	☐	☐	☐
Campus Security	☐	☐	☐	☐	☐	☐	☐
Counseling Center/Services	☐	☐	☐	☐	☐	☐	☐
Financial Aid	☐	☐	☐	☐	☐	☐	☐
Job Placement (Career Resource Center)	☐	☐	☐	☐	☐	☐	☐
Library	☐	☐	☐	☐	☐	☐	☐
New Student Advising	☐	☐	☐	☐	☐	☐	☐
Parking	☐	☐	☐	☐	☐	☐	☐
Reading, Writing, Math Study Skill Improvement	☐	☐	☐	☐	☐	☐	☐
Registration	☐	☐	☐	☐	☐	☐	☐
Student Accounts	☐	☐	☐	☐	☐	☐	☐
Student Canteen/Café	☐	☐	☐	☐	☐	☐	☐
Student Employment (Work Study Program)	☐	☐	☐	☐	☐	☐	☐
Student Success & Tutoring Center	☐	☐	☐	☐	☐	☐	☐
Testing Services	☐	☐	☐	☐	☐	☐	☐
WaveNet Central	☐	☐	☐	☐	☐	☐	☐
B. Academic Area:							
Course content in your major	☐	☐	☐	☐	☐	☐	
Instruction in your major	☐	☐	☐	☐	☐	☐	
Academic Advising in your major	☐	☐	☐	☐	☐	☐	
Course content in General Education Courses	☐	☐	☐	☐	☐	☐	
Instruction in General Education Courses	☐	☐	☐	☐	☐	☐	
Overall academic experience	☐	☐	☐	☐	☐	☐	

Contact Information:

Will you be moving from your present address upon graduation? ☐ Yes ☐ No ☐ Don't Know

If yes and you know your new address information, please complete:

Street/P.O. Box: _____

City/State/Zip Code: _____ Phone #: ( ) _____

Contact Information (continued):

Please list the name and address of a relative through whom we may contact you for future alumni and/or college mailings:

Contact Name: _____

Street Address/PO Box: _____

City, State Zip Code: _____ Phone #: ( ) _____

Program Related Information:

Have you taken any licensing or certification exams related to your major?

- ☐ No, this does not apply to my major
- ☐ No, but plan to do so
- ☐ Yes, I have taken and passed an exam
- ☐ Yes, I have taken an exam, but do not know the results yet.
- ☐ Yes, I have taken an exam, but did not pass.

Employment Information:

Are you currently employed? ☐ Yes ☐ No ☐ Not Currently Seeking Employment

If Yes, is it ☐ Part-time ☐ Full-time

If Yes, is your current employment related to your degree? ☐ Yes ☐ No

Do you plan to continue your current employment after graduation? ☐ Yes ☐ No

Current Employment/Employer Information:

Job/Title: _____

Supervisor Full Name & Title: _____

Employer/Company Name: _____

Department: _____

Employer Mailing Address: _____

Employer/Supervisor Phone #/Ext: **( )** _____ **/** _____

Area Code Number Extension

Education Information:

Do you have plans to further your education? ☐ Yes ☐ No ☐ Don't Know

If yes, please complete:

College/University: _____ City, State: _____

Major/Program of Study: _____

Comments:

_____

_____

_____

_____

I certify that all statements answered on this application are true and complete to the best of my knowledge.

Signature: _____ **Date:** _____