



## Red Lake Nation College

### Graduation Planning Summary & Application

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Catalog Year (ex. 2011-12, 2012-13)

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Term/Year courses will be complete

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Last Name

First Name

MI

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Address

City

State

Zip

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Telephone Number

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Social Security Number

**Please PRINT the name you want on your diploma:**

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Send my diploma to:

☐ My address (listed above)

☐ Other:

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Address

City

State

Zip

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Telephone Number

Note: Spring Commencement information will be available for students in early April; you will be contacted with additional information regarding the commencement ceremony at that time. Students who graduate during the prior fall or subsequent summer term are invited to the spring ceremony with the spring semester graduates.

**Degree:**

**Major Area(s) of Concentration:**

- ☐ Associate of Arts
- ☐ Associate of Applied Science
- ☐ Diploma
- ☐ Certificate

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**Please read the following requirements and check them off accordingly:**

- ☐ Minimum grade point average of 2.0
- ☐ Satisfaction of at least the minimum number of credits required for specific degree, certificate, or diploma, as outlined in the catalog curriculum
- ☐ Fulfillment of all financial and academic obligations prior to graduation
- ☐ Fulfillment of residency requirements of RLNC

Updated July 2015

- ☐ Completion of the Graduation Planning Summary and Application

**Graduation Fee:**

- ☐ Please deduct the \$30.00 non-refundable graduation fee from my Spring Semester scholarships/grants
- ☐ Graduation fee payment included in with the application

**Commencement:**

- ☐ Yes, I will be participating in Graduation exercises
- ☐ I do not wish to participate in commencement exercises at the end of the Spring Semester

**Future Plans:**

- ☐ I have plans to transfer to a 4-year University: \_\_\_\_\_
- ☐ I have plans to find employment after graduation
- ☐ RLNC enhanced my employment skills; I will continue working for: \_\_\_\_\_

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Student Signature

Date

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*For Office Use Only*

**Advisor:**

Total Credits Transferred (    )    Total Credits Completed (    )    Total Credits Yet to Complete (    )

Comments:

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Advisor Signature

Date

**Registrar:**

Plan Approved (    )                      Plan Disapproved (    )                      Date Diploma Mailed: \_\_\_\_\_

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Director of Enrollment and Student Information Signature

Date