



**Application for Degree/Certificate  
&  
Notice of Intent to Participate in Graduation Ceremony**

**Instructions: Respond to all items below that pertain to you.**

**Submit completed petition form to the Office of Admissions & Records before registering for your final term at Carl Sandburg College. 2400 Tom. L. Wilson Blvd. Galesburg, IL 61401 OR complete and send via email: [asstregistrar@sandburg.edu](mailto:asstregistrar@sandburg.edu)**

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**PETITION**

**A. Print your name as you wish it to appear on your degree or certificate:** \_\_\_\_\_

**B. Name & Mailing Address:** \_\_\_\_\_ **CSC ID Number** \_\_\_\_\_

\_\_\_\_\_ **Telephone Number** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**C. Indicate term you plan to finish:**  
\_\_\_\_\_ Pre-Summer \_\_\_\_\_ Year  
\_\_\_\_\_ Summer \_\_\_\_\_ Year  
\_\_\_\_\_ Fall \_\_\_\_\_ Year  
\_\_\_\_\_ Spring \_\_\_\_\_ Year

**D. Attendance Center**  
\_\_\_\_\_ Galesburg  
\_\_\_\_\_ Bushnell  
\_\_\_\_\_ Carthage  
\_\_\_\_\_ Keokuk  
\_\_\_\_\_ West Burlington

**E. Transfer Degree Objective: Please check the box which pertains to you.**  
\_\_\_\_\_ Associate in Arts  
\_\_\_\_\_ Associate in Arts in Teaching (Special Education)  
\_\_\_\_\_ Associate in Science (Agriculture)  
\_\_\_\_\_ Associate in Engineering Science  
\_\_\_\_\_ Associate in Fine Arts in (Music Education)  
\_\_\_\_\_ Associate in General Education  
\_\_\_\_\_ Associate in Arts in Teaching (Secondary Math)  
\_\_\_\_\_ Associate in Arts in Teaching (Early Childhood Education)  
\_\_\_\_\_ Associate in Science  
\_\_\_\_\_ Associate in Fine Arts in (Art)  
\_\_\_\_\_ Associate in Fine Arts in (Music Performance)

**F. Career/Technical AAS/Certificate Objective: Please check the box which pertains to you.**  
\_\_\_\_\_ Associate in Applied Science in \_\_\_\_\_  
\_\_\_\_\_ Certificate in \_\_\_\_\_

**G. Indicate the year of the CSC catalog which you are following to graduate (2009, 2010, 2011, etc):** \_\_\_\_\_

**\*Note If more than five years have passed since your initial enrollment in academic program as indicated above, you may choose a more recent (five years or less) version of the academic program.**

**H. If you have any additional information which may pertain to this evaluation: please note accordingly.**  
**College transfer credit from which school:** \_\_\_\_\_  
**Course Substitutes filed:** \_\_\_\_\_  
**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If you are a Southeastern student, please ask for a separate form at your resident college.**