

# APPLICATION FOR GRADUATION SOUTHEAST TECHNICAL INSTITUTE

I expect to **complete all requirements** for the following degree(s) by the end of:

Fall 2009 \_\_\_\_\_ Spring 2010 \_\_\_\_\_ Summer 2010 \_\_\_\_\_

Please review my record to confirm that my degree completion expectation is correct.

**DEGREE:**

1 Year Diploma \_\_\_\_\_

2 Year Diploma \_\_\_\_\_

Associate of Applied Science \_\_\_\_\_

Program (s) \_\_\_\_\_

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Last Name

**PRINT FULL NAME AS IT SHOULD APPEAR ON DIPLOMA**

Please indicate the hometown to be printed on the commencement program and hometown newspaper you wish to have information released to:

\_\_\_\_\_  
Hometown

\_\_\_\_\_  
Hometown newspaper

Please provide a permanent address for mailing your degree/diploma:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

E-mail address \_\_\_\_\_

STI I.D. # \_\_\_\_\_

Please return this form to:  
Registrar's Office  
Southeast Technical Institute  
2320 N. Career Avenue  
Sioux Falls, SD 57107

For Registrar's Office Use Only:

Sent to Advisor \_\_\_\_\_

Received from Advisor \_\_\_\_\_

Requirements Met? \_\_\_\_\_

***Application Deadlines***  
***Fall 2009 – November 1***

***Spring 2010 – April 1***