

REQUEST FOR DEGREE OR CERTIFICATE

Directions: Please submit the Request for Degree/Certificate during the final semester in which you will complete your program requirements.

- If finishing degrees/certificates in two different terms, submit separate petitions (e.g. Spring 2024 and Summer 2024)
- Students are strongly recommended to have their degree/certificate petition reviewed by a counselor prior to submitting (see Counselor Grad Check below)
- This request can be submitted using one of the following options:
 - Mail or In-Person: Admissions & Records, 3000 Campus Hill Dr, Livermore, CA 94551,
 - Email: lpc-evaluations@laspositascollege.edu OR

Counselor: Leave	e a signed copy with your	counselor		
Anticipated Completion:	Summer	Fall	Spring	Year:
Last Name, First Name, Middle Initial (Preferred or Legal Name)			Student ID Numl	ber
			W	
Mailing Address			Telephone	
City, State and Zip Code			Email	
Degree/Certificate	gree/Certificate Major Title		Catalog Year	
Example: AA-T			The current year LPC Catalog requirements will be used unless otherwise noted	
If applying for an Associate Degree, please select your General Education Pattern:				
Plan A: Las Positas College General Education Plan B: CSU GE-B Plan C: IGETC – For CSU				
My name should appear as follows on my diploma/certificate and commencement program:				
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Advanced Placement (A	I transcripts from all othe	r previously attende reate (IB), College-l		lited post- secondary institutions. ogram (CLEP), DD214, and/or
Student Signature:			Date:	
By signing above, I certify that my r	request form is complete and	d accurate to the best	of my knowledge.	
Counselor Grad Check				
Counselor Signature:			Date:	
Notes or other documents	to be submitted, etc			
STAFF USE ONLY Eval	uator Signature:			Date:
SHADEGR		BDMS		DD214 Verified
Degree/Certificate Award Requirements not met/do	W/ Highest Hor Need to re-appl		W/ Honors (3.25-3.49)	