

# Commencement Registration

Student Name: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

GTCC Student ID # \_\_\_\_\_

Type of Degree or Diploma: \_\_\_\_\_

Will you be attending the ceremony?    Yes    or    No

Number of guests (Please check one)    1    2    3    4

Please email your form to the GTCC Records Office at [records@gtcc.edu](mailto:records@gtcc.edu)

