

Reverse Transfer Graduation Information Form



McLennan Student ID Number

Name (as you would like it to appear on your diploma)

Address to Mail Diploma:

Street Address: _____

City: _____ State: _____ Zip: _____

Reverse Transfer Institution (University)

For Office Use Only:

Semester of Graduation: Fall Spring Summer Year: _____

Award Type:

- Associate of Applied Science
- Associate of Arts
- Associate of Arts in Teaching
- Associate of Science
- Certificate of Completion

Major: _____

McLennan Community College does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs or activities. The following person has been designated to handle inquiries regarding the nondiscrimination policies:
Drew Canham, Vice President of Student Success, 1400 College Drive, 254-299-8645, titleix@mclennan.edu.

McLennan Community College no discrimina a ninguna persona independientemente de la raza, color, origen nacional o étnico, género, discapacidad, o edad en sus programas, actividades o empleo. Para obtener información sobre el cumplimiento de esta política de no discriminación por parte de la institución, comuníquese con el siguiente administrador: Drew Canham, vicepresidente Éxito Estudiantil, 1400 College Drive, 254-299-8645, titleix@mclennan.edu.