



COLLEGE OF MICRONESIA - FSM

Office of Admissions, Records and Retention

www.comfsm.fm

National:

P.O. Box 159, Palikir, Pohnpei 96941
Ph: (691) 320-2480

Chuuk:

P.O. Box 879, Weno, Chuuk 96942
Ph: (691) 330-2689

Yap:

P.O. Box 286, Colonia, Yap 96943
Ph: (691) 350-2296

CTEC:

P.O. Box 614, Colonia, Pohnpei 96941
Ph: (691) 320-3795

Kosrae:

P.O. Box 37, Tofol, Kosrae 96944
Ph: (691) 370-3191

FSM FMI:

P.O. Box 1056, Colonia, Yap 96943
Ph: (691) 350-5244

Accredited by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges,
an institutional accrediting body recognized by the Council for Higher Education Accreditation and the U.S. Department of Education.

APPLICATION FOR GRADUATION

Steps: 1) Complete this form if you are applying for graduation. 2) Sign and submit the completed form to the Office of Admissions, Records & Retention.

PERSONAL IDENTIFICATION

1. Name (Last, First, Middle Initial)

2. Campus or Site

- ☐ CTEC ☐ Chuuk ☐ FMI
☐ Kosrae ☐ National ☐ Yap

3. Date

4. Mailing Address (P.O. Box, Street, City, State, Country, Zip)

5. Date of Birth (MM/DD/YYYY)

6. Sex

- ☐ Male ☐ Female

7. E-mail Address

8. Phone Number

9. Social Security Number

Please check the box of the degree or certificate you are expecting to graduate from

Bachelor of Science Degree

- ☐ Elementary Education
☐ Business Administration, emphasis
in Accounting

Third Year Certificate of Achievement

- ☐ Public Health
☐ Teacher Preparation-Elementary

Associate of Arts Degree

- ☐ Health Career Opportunity Program
☐ Liberal Arts
☐ Micronesian Studies
☐ Pre-Teacher Preparation

Other Degree/Certificate Not Mentioned Above (please specify)

Associate of Science Degree

- ☐ Agriculture & Natural Resources Mgmt.
☐ Business Administration
☐ Computer Information Systems
☐ Marine Science
☐ Nursing
☐ Public Health
☐ Hospitality & Tourism Management

Associate of Applied Science Degree

- ☐ Building Technology
☐ Electronics Technology
☐ Telecommunication Technology

Certificate of Achievement

- ☐ Agriculture and Food Technology
☐ Bookkeeping
☐ Cabinet Making
☐ Career Ed.: Motor Vehicle Mechanics
☐ Carpentry
☐ Community Health Services
☐ Construction Electricity
☐ Electronic Engineering Technology
☐ Nursing Assistant
☐ Public Health
☐ Refrigeration and Air Conditioning
☐ Trial Counselor
☐ Law Enforcement

I expect to graduate by the end of

☐ Spring

☐ Summer

☐ Fall

Year

Student Signature

Date

FOR OFFICE OF ADMISSIONS, RECORDS & RETENTION USE ONLY

- ☐ The above named student IS recommended for graduation upon
successful completion of his/her program requirements.
Date of conferral of Degree/Certificate

- ☐ The above named student is NOT recommended for graduation
(please write the reason below)

Notes

Registrar's Signature

Date

PROCESSED BY

JOB TITLE

DATE PROCESSED

Revised: 08/19/2026