## LABI COLLEGE GRADUATION APPLICATION

### **1. STUDENT INFORMATION**

	Last name	First name		Middle name	
Address:					
	Street	Apt#	City	State	Zip Code
Telephone: (_	)	Date of Birth:		_Email:	

#### 2. GRADUATION PARTICIPATION REQUIREMENTS

To be a candidate and participate in the Graduation Commencement, all students must meet the following requirements:

- 1. A minimum of 6 outstanding units and a 2.0 cumulative GPA.
- 2. Student must have turned in a graduation application and paid the graduation fee.
- 3. All unpaid balances must be met by the last day of the semester.
- 4. Student must have completed the associate/bachelor program exit assessment.
- 5. Students must be in good standing with ALL departments; including Student Life/Spiritual Formation and Library.

# By submitting an application I understand that this does not guarantee my application will be approved or that I will participate in the graduation commencement. Student Initials: \_\_\_\_\_

#### **3. PAYMENT INFORMATION**

Please note: All fees are Non-Refundable.	Methods of Payment Available:
LABI Associate/Bachelor Student \$150.00 (Cap-n-gown regalia must be purchased additionally)	<ol> <li>In Person: For cash, credit, debit, or check; please make an appointment by emailing <u>info@labi.edu</u> or by calling</li> </ol>
Total Payment to Process: \$	(626) 968-1328 prior to your visit.
Application will not be processed without payment.	2 Quan the phone. Dehit or gradit cards
*Ordering additional diploma degrees are \$50.00 each.	2. <b>Over the phone:</b> Debit or credit cards (3% transaction fee), call (626) 968-1328.
	(5% transaction ree), can (020) 908-1528.
4. DEGREE INFORMATION	3. <b>By Mail</b> (NO CASH): Please make all
Write your name as you want it to appear on degree:	checks payable to: <u>LABI College</u> and write a MEMO. Mail checks to:
	LABI College
□ Ministerial Certificate □ Associate Degree □ Bachelor Degree	(Attn: Business & Finance Office) 14209 Lomitas Ave,
Height: Weight:	La Puente, CA 91746

Student Signature: \_\_\_\_\_\_

Date: \_\_\_\_\_

LABI OFFICE USE ONLY							
Program Exit Assessment Completed?	$\Box$ YES	$\Box$ NO	Dept. Admin. Initials:				
Units Completed?	$\Box$ YES	$\Box$ NO	Dept. Admin. Initials:				
Spiritual Formation/Residence Clearance?	$\Box$ YES	$\square$ NO	Dept. Admin. Initials:				
Financial Clearance?	$\Box$ YES	$\Box$ NO	Dept. Admin. Initials:				

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