



AMERICAN COLLEGE EARLY GRADUATION FORM

All students changing their anticipated graduation date in order to graduate early are required to complete this form.

Name: _____

Student ID: _____

Proposed graduation date:

(Day/Month/Year)

To new earlier/actual graduation date:

(Day/Month/Year)

Student Signature: _____ Date: _____

Student has been approved to graduate.

Trainer's signature: _____ Date: _____