



PETITION TO ATTEND MAY COMMENCEMENT CEREMONY

Complete this form and submit to your Academic Dean for signature. Form must then be returned to the Registrar's Office.

**Please print clearly.*

Name: _____

Soc. Sec. No.: _____

Address: _____

E-mail Address: _____

Hometown: _____

State/Country: _____

Major: _____

Degree: _____

I wish to attend the May commencement ceremony. I am within 8 credit hours of completing my degree requirements.

Student's Signature

Date

Academic Dean's Signature

Date

OFFICE USE ONLY

Grad App: _____

*** Note: Application for graduation must be filed with this form.***