



COMMENCEMENT CEREMONY REQUEST NOT TO ATTEND

Please complete the information below and return this form to the Registrar's Office, located in the Fletcher Center for Student Services.

PLEASE PRINT:

NAME: _____ ID NUMBER: A _____

I will be graduating: Year: _____ Fall Spring Summer

I will be receiving the following degree(s):

I am requesting permission not to attend Commencement Exercises because:

I attended Commencement Exercises in _____ and will not be attending this year.

Student Signature: _____

Office use only:

Checked Degree Status

Student received diploma cover

Processed by: _____

Date: _____