



Commencement Ceremony Excused Form

It is important that you complete and submit this form **to your college office** at least two weeks prior to the date of your Commencement.

Print your full name.

Date: _____

First	Middle	Last
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Your College	Social Security Number
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_____ for _____ Commencement.

Expected Degree	Quarter	Year
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Check ONLY ONE of the boxes below:

- I will pick up my diploma within one week after Commencement at the Office of the University Registrar, 320 Lincoln Tower, 1800 Cannon Drive.
- I cannot personally pick up my diploma within one week, but I am authorizing the person(s) named below to pick up my diploma on my behalf.

Full name of the friends, relatives or

Colleagues to whom you are giving permission.

Your signature required to release diploma to someone else.

- Please mail my diploma to the address provided below.

The information below will be used to prepare a mailing label for your diploma or to contact you if there is a problem during diploma processing. (You should receive your diploma about one month after your Commencement Date.)

Please note, diplomas are not forwarded via US Mail.

Name: _____

First	Middle	Last
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Address: _____

Number	Street	Apt. #
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City	State	Postal Code	Country
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