

Notification of Attendance Change

Name: _____ ID# _____
Last Name *First Name* *Middle Name*

I have applied for graduation in
____ Fall Semester, 20____ ____ Spring Semester, 20____ ____ Summer Semester, 20____.

My plans regarding Commencement in May have changed.

____ I will be attending Commencement. ____ I will not be able to attend Commencement.

Diploma Mailing Address

Please verify the address where you would like your diploma mailed if you are not able to pick it up in the Office of the Registrar.

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Country: _____

Signature of Applicant: _____ Date: _____

*Please submit this form to the Office of the Registrar. **Handwritten forms will not be accepted.***