



GRADUATION NOTIFICATION

Students who will complete their degree requirements during the summer term are eligible to participate in the May commencement exercises. Please Indicate the month and year you expect to complete your degree requirements.

December May June August Year _____

Date _____

Bryant ID _____ Degree _____

Name _____

(Indicate your name as you would like it to appear on your diploma)

Street _____

City _____ State _____ Zip Code _____

Country _____

Cell Phone (____) _____

Home Phone (____) _____

Home Email _____

Employer _____ Job Title _____

Street _____

City _____ State _____ Zip Code _____

Work Phone (____) _____

Work Email _____

Graduates participating in commencement exercises will be required to purchase academic regalia (cap, gown and hood) as provided by the Bryant University Bookstore. If you have any questions regarding your **graduation status**, please contact the Graduate School Office at 232-6230.