

Commencement Change Request Form

* Be sure to fill out the top portion and sign the bottom of this form.

Student Name: _____
GoCard Number: _____
Degree Expected: _____
Graduation Date (Mth/Yr): _____
Daytime Phone Number: _____

Request to Change Name

I would like my name to appear as _____
on the (check where appropriate) diploma program school record

* Note that if your name has changed since the date of your matriculation you must provide a copy of written documentation with the new name.

Request to Change Section (JD students only)

I am currently scheduled to graduate with Section _____.

I would like to change my graduation Section to _____.

Request to Add or Change School/Degree Information

Please make the following correction/addition to my school/degree information:

School Name: _____

Name of Degree: _____

School Name: _____

Name of Degree: _____

*The information you provide should be as complete as possible. If you list a foreign school or degree, please provide proper spelling, the name of the country as well as any accents.

Additional Information: _____

Signature: _____ Date: _____