## GRADUATION INFORMATION FOR MAY GRADUATES ONLY

*Use this form only if you have been scheduled to graduate by your School or College. If you are unsure, contact your graduation coordinator!*

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name</td>
<td>______________________________________________________________________</td>
</tr>
<tr>
<td>ID Number</td>
<td>______________________________________________________________________</td>
</tr>
<tr>
<td>College</td>
<td>______________________________________________________________________</td>
</tr>
<tr>
<td>E-mail</td>
<td>______________________________________________________________________</td>
</tr>
<tr>
<td>Date</td>
<td>______________________________________________________________________</td>
</tr>
<tr>
<td>Diploma Name</td>
<td>______________________________________________________________________</td>
</tr>
</tbody>
</table>
|                             | * Print your name exactly as you want it to appear on your diploma.  
  * If your name contains special characters (diacritical marks), please add these marks clearly.  
  * Diploma name change will be reviewed and may require additional documentation. |

**Will you be attending the May 'All University Ceremony' at 1 p.m. on Nickerson Field?**  YES  NO

**Will you be attending the May School/College diploma convocation ceremonies?**  YES  NO

If YES, and you are in a Dual Degree program, or have a Double Major,  
please identify which convocation ceremony(ies) you will be attending:  
____________________________________________________________________  
____________________________________________________________________  
____________________________________________________________________  

If YES, and you have a Double Major,  
please identify the convocation ceremony at which you would like to receive your diploma:  
____________________________________________________________________

If NO, and you would like your diploma mailed to you, please provide your mailing address below:  
____________________________________________________________________  
____________________________________________________________________  
____________________________________________________________________  
____________________________________________________________________

Please mail or fax this form to:  
Office of the University Registrar  
Diploma Office  
881 Commonwealth Avenue  
Boston MA 02215  
(ph) 617-353-3604  
(fax) 617-358-6046