

REQUEST TO PARTICIPATE IN COMMENCEMENT CEREMONY

OFFICE OF THE REGISTRAR
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Request for a student to participate in this year's Commencement Ceremony due to special circumstances is for graduate master's students anticipated to complete degree requirements during the summer semester and undergraduate students only.

Last Name First Name MI

SIS ID Telephone

UML Email Personal Email

Program Commencement Year

Reason for Request:

Date

Student Signature

**Chair/Coordinator or Dean's signature is required prior to final submission to the Registrar's Office.
(Prior to approval, master's students anticipated to graduate in the summer semester must be registered for summer courses.)**

Approved Denied Chair/Coordinator/Dean

Date

Signature

For Office Use Only:

Doc Type: CMNC Participation Request LSR

Processor Name Date Verifier 1 Name

Imager Name Date Verifier 2 Name Effective Term