

COMMENCEMENT INFORMATION FORM

The information provided below will be sent directly to Jostens for printing purposes!



 Please **CLEARLY PRINT** your **NAME**
 exactly as you wish it to appear on your **DIPLOMA!**


FIRST NAME _____

MIDDLE NAME _____


LAST NAME _____

SUFFIXES (ex. Jr, III, IV, etc.) _____


 The following information is necessary to ensure proper
 cap and gown ordering for all commencement participants.
 Please ensure **ALL** information is **current** and **accurate!**

Height _____(feet) _____(inches) Weight _____(pounds)

Please check this box if you intend to provide your own mortarboard and gown.
 Please check this box if you are NOT planning to participate in commencement.*
***Please be advised, that your decision regarding commencement ceremony participation is FINAL!**
Students meeting all graduation criteria will receive a diploma, regardless of ceremony participation.

The information below is needed to **update** your **permanent record** prior to commencement. Should this information change, please inform the SCHS Guidance Department Registrar.
 

Street Address _____ Apt. # _____

Zip Code _____ Home Telephone _____ - _____ - _____

School Email: _____

Personal Email: _____

Personal Cell Phone: _____ - _____ - _____

FIRST NAME ~

LAST NAME ~