

GRADUATION PARTICIPATION FORM

Please complete and return this form by Oct. 11, 2019, to the Office of the Provost in Horner Administration Building. You can mail your form to this address:

The Office of the Provost
Methodist University
5400 Ramsey St.
Fayetteville, N.C. 28311

You can also email it to pellis@methodist.edu or fax it to 910.630.7410.

Name of Graduate: _____

_____ I will attend graduation.

_____ I **do not plan** to attend graduation.

My sponsor for the graduation hooding ceremony will be: _____

First Name

Last Name

Relationship of sponsor (please circle one):

Family Member*

Faculty Member

Friend

* Identify the specific relationship of the family member: _____

Is your sponsor a Methodist University graduate? Yes (include graduation year) _____ No _____

If you have a parent or a guardian who is an ordained minister and would like to participate in the Baccalaureate service on Friday, Dec. 13, 2019 at 4:00 p.m., please have them contact our University Chaplain, Rev. Kelli Taylor, at 910.630.7515 or email ktaylor@methodist.edu.

Name: _____

Contact information: _____

Name of church: _____

Is he or she a Methodist University graduate? Yes (include graduation year) _____ No _____

[Engage. Enrich. *Empower.*]