

# GRADUATION PARTICIPATION FORM

Please complete and return this form by **Nov. 16, 2022**, to the Office of the Provost  
in the Horner Administration Building.

**Or email this to [pellis@methodist.edu](mailto:pellis@methodist.edu).**

Name of Graduate: \_\_\_\_\_

Preferred pronouns: \_\_\_\_\_ Student ID #: \_\_\_\_\_

\_\_\_\_\_ 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 choose one):

\*Identify the specific relationship of the family member: \_\_\_\_\_

Family Member\*

Faculty or Staff Member

Friend

[ Engage. Enrich. *Empower.* ]