

Non-Disclosure Request Form

I do not want my name, hometown, degree, and honors listed in the publicly-disseminated University Commencement Program, and I also do not want my name included on the Graduation T-shirt.

Date _____ *

NDId/NetID _____

Student Signature _____

Student Name _____
(Please Print)

This form must be delivered to the Office of the Registrar, 300 Grace Hall, by the student. A photo ID will be required. The non-disclosure request will remain in effect until the Office of the Registrar receives a written request to remove the non-disclosure status.

***THIS FORM MUST BE RECEIVED BY APRIL 20, 2018**