

Commencement Participation Form

Deadline: April 8th

Please complete and return this form even if you do not plan to participate.

Please print.

Check one:

I will participate in the Commencement Ceremony.

I will not participate in the Commencement Ceremony.

Name: _____

Student ID Number: R _____

Major: _____

Mailing Address: _____

Home Phone: (_____)_____-____- Cell Phone: (_____)_____-____-

Personal Email Address: _____

When will you complete your degree requirements?

Fall 2015

Spring 2016

Summer 2016

Return this form by mail, email or fax by April 8th.

Email: easons@roanestate.edu or Fax: (865) 481-2025

**Roane State Community College
Attn: Graduation – Shelia Eason
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Oak Ridge, TN 37830**