



The Graduate School

# Doctoral/M.F.A. Commencement Participation Request

Request to participate in Hooding Ceremony prior to defending by the established deadline.

Graduating doctoral students are accorded special recognition during commencement exercises by participating in a Hooding Ceremony. To participate in this ceremony, students must have filed an application for graduation for the appropriate semester and successfully defended their dissertation and filed the completed Notice of Completion with the Graduate School at least two weeks prior to the commencement exercises. *If you have met these requirements, this form is not needed.*

**Doctoral or M.F.A. degree candidates who wish to participate in a commencement hooding ceremony PRIOR to filing the Notice of Completion form by the established deadline must complete this form to request approval from their committee, Graduate Program Director, and the Graduate School to participate.**

Name: \_\_\_\_\_ NSHE ID: \_\_\_\_\_

Email: \_\_\_\_\_ Graduate Program: \_\_\_\_\_

Degree: \_\_\_\_\_ Expected date of defense: \_\_\_\_\_

Expected graduation term/year:                      May                      August                      December                      Year: \_\_\_\_\_

Requested commencement ceremony to be hooded:                      May                      December                      Year: \_\_\_\_\_

Who will be hooding you at the ceremony?: \_\_\_\_\_

Major Advisor's/Committee Chair Signature                      Print Name                      Date

Co-Advisor/Committee Co-Chair Signature (if applicable)                      Print Name                      Date

Committee Member Signature                      Print Name                      Date

Committee Member Signature                      Print Name                      Date

Committee Member Signature                      Print Name                      Date

Committee Member Signature                      Print Name                      Date

Graduate School Representative Signature                      Print Name                      Date

Graduate Program Director's Signature                      Print Name                      Date

Graduate Dean's Signature                      Date

### For office use only

Comments:                      Evaluator                      Date

