



Columbia Metropolitan Campus
100 Gateway Corporate Boulevard
Columbia, SC 29203
(P) 803-699-0900 (F) 803-699-2488

Please complete this form and submit it to the campus director at byrds1@webster.edu, by **May 3, 2024** to ensure all requirements have been met.

Name (please print): _____ Student ID # _____

Address: _____

Daytime Phone Number: _____ Email Address _____

Degree (BA, MA, MBA, MHA) _____ Program: _____

Emphasis or Dual Emphasis _____

Ceremony Date: June 1, 2024 - 11:00am - Koger Center for the Arts, 1051 Greene Street
Columbia, SC 29201

While I accept to participate in the ceremony on _____ at _____, I understand that my name is will **NOT** appear in the program. I understand that participation in the ceremony does **NOT** signify completion of all the requirements for graduation and that I will **NOT** receive my degree until all of those requirements have been met.

Signature _____ Date _____