

**This form is for advanced-degree candidates only. Only graduate students who wish to apply to participate out-of-term (i.e., “walk” in a commencement ceremony at a time other than the term in which all requirements have been met) can submit this form.**

**Note:** Undergraduate degree candidates who request to participate out-of-term should contact their college dean’s office and, if approved, obtain a letter to provide to the UF Bookstore to permit regalia orders.

**Instructions:** Print, complete and submit this form to your college dean’s office *no sooner than* the first week of the term of the ceremony. Approval must be granted and the Director of Presidential Events and Commencement must receive notification of the approval *no later than* three weekdays before the ceremony.

**Student: Complete and sign**

Name: _____		UFID: _____	
College/Department: _____		Degree: _____	
Email Address: _____		Phone Number: (____) _____	
Scheduled term of graduation:	Year: _____	Spring <input type="checkbox"/>	/ Summer <input type="checkbox"/>
		/ Fall <input type="checkbox"/>	
Requested term to walk:	Year: _____	Spring <input type="checkbox"/>	/ Summer <input type="checkbox"/>
		/ Fall <input type="checkbox"/>	
Reason(s) for requesting to participate out-of-term (attach additional page if necessary):			
<input type="checkbox"/> I understand that I will be recognized at the commencement ceremony but my name will not appear in the commencement program. My name will be included in the program during the term all my degree requirements are satisfied.			
<input type="checkbox"/> I understand that I am responsible for following all graduation instructions listed on the UF commencement website ( <a href="https://commencement.ufl.edu">https://commencement.ufl.edu</a> )			
Student’s Signature _____			Date _____

**College: Dean’s Office to complete and sign (must be signed by a Dean)**

Check one and specify reason(s):			
<input type="checkbox"/> I <b>approve</b> the student to participate in the requested commencement ceremony for the following reason(s):			
<input type="checkbox"/> I <b>do not approve</b> the student to participate in the requested commencement ceremony for the following reason(s):			
Signature _____	Title _____	College _____	Date _____

**Send completed form to**

Stephanie McBride, Director of Commencements, Office of the Provost 235 Tigert Hall,  
stephmcbride@aa.ufl.edu, 352-392-5277