

S	TATEMENT OF INTENT	TO GRADUA	ΛТЕ	
Please complete all info	ormation and return to the Scho	ol of Population a	nd Public Health Of	fice
Full Name for Diploma				
Please include any credentials	you have previously earned that you wo	uld like printed (e.g. Sh	eldon Cooper, PhD.)	
Program				
Concentration (For MPH Students Only)	Generalist	Health Promotion and Communication		
Semester of Graduation	(e.g. Spring 2021)			
Degree Sought	MPH	Certificate		
DIPLOMA Pick up at Commence	ement*			
Pick up from the Reg	istrar's Office* *Diplomas not picked up are shr	edded after 6 weeks. Registrar	's Office will not mail to a Lubbo	ock address.
Please mail to me				
Diploma Mailing Ado	dress			
Will you be attending the SPI NOTE: You must order Rega	PH Commencement ceremony in May? lia to attend this event	Yes	No	
If you would like your name	to be printed in the Commencement Pro	ogram, you must have a	a release of information	form on file with SPPH
SPPH Approvals		• ····,) - · · · · · · · · · · · · · · · · · ·		,

Received By

Date Received

Upon completion, please email form to spph@ttuhsc.edu