

St. Simon Graduation Diploma Name Form

Please complete the following information and return this form by **Friday, September 23, 2011** to Mrs. Gremett or Mrs. Nealon.

PRINT the student's name exactly as you want it to appear **on the diploma.**

PRINT the student's name exactly as you want their name **called out at graduation.**

Please discuss the name you choose with your child that will be called out at graduation; students tend to want to change the name at the graduation practice.

Parent Signature

Date