Please save this form prior to emailing to M. Oswald

REGALIA REQUIREMENTS - SPRING CONV	OCATION 2015		
DAY AND DATE:		AM	PM
Name:	-		
Department:			
Office Phone Number:	E-mail address:		
Form of Participation:			
I have my own academic regalia			
I require:			OFFICE USE ONLY
Hood (highest degree)	F	IOOD No.	
Mortarboard (S/M/	L/) H	IAT No.	
Gown (height - wearing	(shoes) G	GOWN No.	
RETURN FORM TO: M. OSWALD [x84540], c/o University Secretariat, Room 4101, Stv. H.			

EMAIL: MSOSWALD@UWO.CA

I