Special Accommodations Request for Commencement

If you will be attending commencement on May 8, 2010 and you or a guest have special needs to be addressed, please complete this form and return it to the Registrar’s Office.

Name (print)_______________________________________________________________

School_________________________ Degree__________________________

Phone number______________________________________________________

Accommodation requested:

Hearing impaired, need ASL interpreter: Grad_______ Guest(s) How many? _________

Wheelchair-bound: ______

Accompanied by guide animal_______ Need walking escort_______

Other (specify)__________________________________________________________

______________________________________________________________________

Mail: Registrar’s Office
1000 Regent University Dr.
Ste. SC 235
Virginia Beach, VA 23464

Fax: 757.352.4033