

TO: ALL SENIOR PARENTS/GUARDIANS

Please PRINT or TYPE your son's LEGAL NAME in the space provided below as you wish it to appear on his diploma.

The legal name of my son is:

First Name

Middle Name

Last Name

Parent/Guardian Signature

**PLEASE FILL OUT THIS FORM AND RETURN IT TO MRS. CANNATA
NO LATER THAN FRIDAY, JANUARY 26TH.**

**WE MUST HAVE A COMPLETED FORM FOR EACH SENIOR SO THAT WE CAN ORDER
DIPLOMAS FOR GRADUATION. PLEASE RETURN THIS FORM BY THE DEADLINE INDICATED.**

Thank you for your cooperation.