



**South Texas**  
COLLEGE OF LAW  
— HOUSTON —

PRIVATE AND INDEPENDENT SINCE 1923.

**Absentia Form**

Please accept this as an official notification that I would like to be excused from the commencement exercise.

STUDENT INFORMATION															
Student Name (First)			(Middle)		(Last)			Student ID Number							
								G							
Date		E-mail Address				Commencement Ceremony Date									
		@stcl.edu													
Provide written explanation of the circumstance that prevents participation in the ceremony in the space provided below.															
Student Signature _____						Date _____									
President & Dean Signature _____						Date _____									

**Please mail or fax completed form to:**  
 South Texas College of Law Houston 1303 San Jacinto Street Houston, TX 77002 Attn: Registrar's Office  
 Fax:(713) 646-2939 Email: registrar@stcl.edu

**Office Use Only**

**Processed by:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

cc: Dean