

EMMANUEL COLLEGE, CAMBRIDGE

Surname _____ Previous Degree(s) _____

Forename(s) _____ Date(s) _____
(In full and all in block letters please)

Present address _____

Permanent address _____
for College _____
records _____

Tel: _____

Fax: _____

Email: _____

(Please indicate to which address you wish your degree certificate to be sent)

Delete where necessary:

I wish to take my.....degree

in person at the Congregation on

I shall/shall not require accommodation for the night(s) of

I shall/shall not be able to lunch* before the Congregation and shall/shall not be accompanied by a guest

*Vegetarian/non-vegetarian

I wish to take my.....degree by proxy

Signature

Please remember to enclose a cheque for (Fee £5.00/£8.00**, Room and Breakfast £28.55) made payable to Emmanuel College with your reply.

** £5.00 fee if you took your first degree at this university, £8.00 if you took it at another university.