



The News Ministry is looking for all 2017 Graduates!

Please print all information legibly.

Graduate's full name: _____

Date of graduation: _____

Please **check** the box next to the educational level from which you graduated.

- Pre-School Kindergarten Elementary
 Middle School Junior High Senior High

Name of school: _____

POST-SECONDARY DEGREE (GED, Certification, Computer, Trade, Paralegal, etc.)

Name of school: _____

COLLEGE: Associates, Bachelor's or Doctor's
(please state the degree)

Name of school: _____

Degree _____

HONORS RECEIVED: (Check if applicable)

- Cum laude (3.65-3.79) Magna Cum laude (3.80-3.89)
 Summa Cum laude (3.90 or higher)

Name of person submitting this form: _____

Phone #: _____

All forms must be submitted by **Tuesday, September 12th**. Completed forms, should be put in the box, located on the Information Table outside of Room 115.

Please note: This Form is for Christian Stronghold Members Only!