

Cap & Gown Order Form  
Commencement \_\_\_\_\_ Year

*Please check with Registrar yearly deadline for filing this form*

**Name:** \_\_\_\_\_  
(Please print clearly)

**Phone #:** \_\_\_\_\_

**Height:** \_\_\_\_\_

**Weight:** \_\_\_\_\_

**Degree Type:**

Doctor in : Clinical Psychology Psy. D.

**Doctoral:**

**Complete Set**  \$80.87 (*Tax Included*) (Please note: Prices are subject to change)

Amount Paid \$ \_\_\_\_\_

Cash      CC      Check  
*Checks payable to C.W. Post Bookstore*

\*\*Please note that Cash and Credit Card payments must be made in person at the Campus Bookstore;  
Only payments made by check can be sent in the mail\*\*

---

**Name:** \_\_\_\_\_