



# Graduation Notification

Want to share the news of your successful completion of your BOMI program with a supervisor or other company representative? Fill out the form below and BOMI will send official confirmation on your behalf.

Fill out the form below, save and email to [service@bomi.org](mailto:service@bomi.org).

Please send my graduation notification to:

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Relationship to Graduate \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

## Graduate Information

Your Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

Designation earned \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_