

PARTICIPATION GUIDELINES

Students in “Good Standing” are eligible to participate. You are considered in good standing if you:

1. Complete all required hours
(Workshops/Seminars/Clinical/Internship/Computer Classes).
2. Complete all classroom requirements and pass senior final.
3. ST students - complete the CST exam.
4. Pay tuition balance.

WHEN

Friday, June 6, 2025 at 6:00 pm

WHERE

**Santa Fe Station Hotel & Casino,
Centennial Ballroom**

4949 N Rancho Drive,
Las Vegas, NV 89130

*See below for directions and parking information

REGISTRATION INFORMATION

All eligible graduates must register to participate by 3:00 pm on May 23.

- Please use the attached Graduation Registration Form.
- Late registrants will be accepted based on availability (additional fees apply).
- Registration fee is \$70 (seventy dollars).
 - Registration fee is non-refundable.
 - Should graduate fail to meet participation guidelines prior to the registration deadline, registration fees will be applied to the next graduation ceremony.
 - Registration fee includes Cap, Gown and 4 tickets.
 - Up to 4 (four) additional tickets may be purchased for \$10 (ten dollars) each.
 - Registration Fee for graduates with Perfect Attendance is \$35 (thirty five dollars).
 - Sign off by Campus Director required.
 - Acceptable payment methods include: Cash, Money Order, and Debit/Credit card.

TICKETS/AUDITORIUM RULES AND REGULATIONS

Each guest must have a ticket to enter the Auditorium.

- This includes children of all ages.
- No drinks, or food allowed in Auditorium.

Each graduate is allowed to purchase additional guest tickets prior to the event for a fee of \$10 (ten dollars) each.

- Tickets are non-refundable.
- Tickets will be distributed at the campus during the Cap & Gown expo.
- If seating permits, tickets will be available for purchase at the registration desk at the venue.
- Guest seating will begin at 5:15 pm.

Late registrants are subject to an increase in registration fee. Cap and Gown sizes cannot be guaranteed after registration deadline. Guest tickets are subject to availability.

GRADUATE ARRIVAL & ATTIRE INFORMATION

Graduates should arrive at 4:00 PM

Graduates are required to check-in at the Registration Desk no later than 4:30 PM for ceremony preparation.

- There will be a registration table located upstairs in the lobby.
- Please arrive already dressed in your cap and gown.
 - There will not be a secured area to leave personal belongings.
 - In order to participate in the graduation ceremony you must be dressed in your cap and gown.
 - Please wear professional/business attire, including shoes under your gown. No jeans will be permitted.
 - Gentlemen are encouraged to wear a shirt and tie.
 - Ladies are encouraged to wear shoes that will enable them to safely and quickly walk up and down stairs.
 - We recommend all graduates wear comfortable shoes as you will be required to stand for a long period of time.
- No food or beverage allowed inside the auditorium.

****DO NOT BE LATE. THE GRADUATION CEREMONY WILL START PROMPTLY AT 6:00 PM**

GRADUATION GOWN SIZING CHART

Use the following chart to determine what size gown you will need.

This information should be entered on the attached graduation registration form.

Size	Regular	*1	*2
4'10 - 5'0	Up to 159	160 - 219	220 - 280
5'1 - 5'3	Up to 179	180 - 239	240 - 300
5'4 - 5'6	Up to 199	200 - 264	265 - 330
5'7 - 5'9	Up to 229	230 - 294	295 - 360
5'10 - 6'	Up to 259	260 - 329	330 - 400
6'1 - 6'3	Up to 284	285 - 354	355 - 425
6'4 - 6'6	Up to 309	310 - 384	385 - 460
6'7 - 6'9	Up to 329	330 - 404	405 - 480
6'10 - 7'	Up to 349	350 - 429	430 - 510

GRADUATION REGISTRATION FORM

Please bring this completed form along with your registration fee to the reception desk

First Name:		Last Name:	
Date of Birth:		Social Security # (Last 4 digits):	XXX-XX-
Cell Phone:		Home Phone:	
Email Address:			
Address:	Street	City	State
			Zip Code

Program (please check one):

- | | | |
|---|---|--|
| <input type="checkbox"/> Medical Assistant | <input type="checkbox"/> Dental Assistant | <input type="checkbox"/> Pharmacy Technician |
| <input type="checkbox"/> Medical Insurance Biller & Coder | <input type="checkbox"/> Business Office Administration | <input type="checkbox"/> AOS Surgical Technology |
| <input type="checkbox"/> A.S. Healthcare Administration | | |

Employment Information (*Related to your field of study*)

Are you currently employed in your field of study? ☐ Yes ☐ No

If yes, please complete the following information:

Facility:		Supervisor Name:	
Office Phone:		Pay Rate: \$ per hour:	
Facility Address: Street		City	State
			Zip Code
Start Date:		Status (please check one):	Full time <input type="checkbox"/> Part time <input type="checkbox"/>

If no, one of our Career Services Representatives will contact you to schedule an appointment to assist you in obtaining a career in your field of study.

- ☐ **Standard Graduation Package**
(Includes Cap, Gown, standard Tassel
and 4 Tickets) \$70

- ☐ **Perfect Attendance Graduation Package**
(Includes Cap, Gown, standard Tassel
and 4 Tickets) \$35

Gown Size: _____

(Please refer to the gown size chart on the previous page)

Additional Tickets \$10 each (maximum of 4 tickets)

1 ☐ 2 ☐ 3 ☐ 4 ☐

Total Amount: \$ _____

Ticket Numbers: 1: _____ 2: _____

3: _____ 4: _____

5: _____ 6: _____

Perfect Attendance Verification:	(To be completed by Campus Director) (if applicable)		
Amount Collected: \$		Payment Method:	(Cash, Money Order, Check, Credit/Debi)
Receipt Number:		Date of Payment:	
Collected By:		Graduate Signature:	