

AUXILIARY SERVICES
Faculty & Staff
CAP, GOWN & HOOD REGISTRATION FORM

West Hall Basement Room 20
and
Post Office Basement

Extension : 3155 or 3510 e-mail: auxserv@aub.edu.lb

Name : _____ **Faculty :** _____

Title : _____

E-mail : _____ **Telephone :** _____

Kindly provide us with approximate sizes and hood colors :

Gown Size XL L M S

Cap Size XL L M S

PhD **MD** **Masters** **BS/BA** **Hood Color :** _____

AUB Phd Graduate Yes No

Rental Fees 50\$

Deposited Fees for Phds and MDs are \$250

Cost Center to be charged: _____

If garment is not returned after two months, the full cost of \$250 will be charged to the above cost center.

Signature : _____

Dean's Approval : _____

Date : _____