



# NEW YORK MEDICAL COLLEGE

A MEMBER OF THE TOURO COLLEGE AND UNIVERSITY SYSTEM

## Commencement 2019—Alumni and Faculty Acknowledgement

The Office of Public Relations would like to know of any graduating students in the Class of 2019 with a parent, grandparent, spouse and/or sibling who is a graduate and/or faculty member of New York Medical College.

Please return this form to:  
New York Medical College  
Office of Public Relations  
40 Sunshine Cottage Road  
Valhalla, NY 10595

### Please submit information by March 20, 2019.

Name of graduate \_\_\_\_\_ Telephone \_\_\_\_\_

School/Degree \_\_\_\_\_

Name(s) of graduate's alum parent(s) \_\_\_\_\_

Degree earned and year of graduation \_\_\_\_\_

Name(s) of graduate's alum grandparent(s) \_\_\_\_\_

Degree earned and year of graduation \_\_\_\_\_

Name of graduate's alum spouse \_\_\_\_\_

Degree earned and year of graduation \_\_\_\_\_

Name(s) of graduate's alum sibling(s) \_\_\_\_\_

Degree earned and year of graduation \_\_\_\_\_

Name(s) of faculty member parent(s)  
and department \_\_\_\_\_

Name(s) of faculty member grandparent(s)  
and department \_\_\_\_\_

Name of faculty member spouse  
and department \_\_\_\_\_

Name(s) of faculty member sibling(s)  
and department \_\_\_\_\_

Please contact [lori\\_perrault@nymc.edu](mailto:lori_perrault@nymc.edu) or (914) 594-4536 if you have any questions.