



2007 BSN & MSN Graduate of Graceland University School of Nursing

Congratulations on all your accomplishments! We hope the end results are very rewarding for you.

As a Graceland University graduate you are eligible to order a nursing pin. The pin is unique to Graceland and was designed following a great deal of research and deliberation. Professor Iola Tordoff in consultation with the first Chairperson of the Division of Nursing, Margaret McKeivit, created the final design for the pin and nursing cap.

A copy of the pin can be seen at the top of this page. The actual pin measures 1 x 1 ¼ inches. You may choose either a gold filled or 10K gold pin. To order a pin fill out and return the lower portion of this form to:

Graceland University – Independence Campus
Attention: Barbara Garwood
1401 West Truman Road
Independence, MO 64050-3434
OR call: 800-833-0524 ext. 4515 or ext. 4511

Pins are ordered only once a year and are received in our office in late April. We purchase a limited supply of extra pins to have on hand during the remainder of the year for late graduates.

Best wishes with your future in nursing! We enjoy hearing from our graduates and hope that you will keep in touch over the years. We love hearing about our graduates' accomplishments.

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Note: You may pay by check or credit card. We accept Visa, Master Card, Discover and American Express.

ORDERS MUST REACH OUR OFFICE BY April 27, 2007

I would like to order the following: *(please note Missouri tax must be paid on each item)*

___ **Nursing Pin**, 10K gold, \$220.00 (+ tax/16.72) = **\$236.72**
___ **BSN/MSN attachment bar**, 10K gold, \$49.00 (+tax/3.72) = **\$52.72**

*Do you plan to attend
the pinning ceremony:
Friday, May 18, 2007*

___ **Nursing Pin**, Gold Filled, \$65.00 (+ tax/ \$4.94) = **\$69.94**
___ **BSN/MSN attachment bar**, Gold Filled, \$28.00 (+ tax/\$2.13) = **\$30.13**

YES NO MAYBE

___ **Nursing Cap** with blue/gold stripes, \$18.00 (+ tax/1.37) = **\$19.37**

NAME: _____ ID# _____

ADDRESS: _____

City

State

Zip

PHONE: _____ Work Phone: _____

E-MAIL: _____

PAID BY: Check ___ Master Card ___ Visa ___ Discover ___ American Express ___

CREDIT CARD # _____ Exp. Date: _____

SIGNATURE: _____