

**Death Resolution Request Form**  
**Office of the Secretary**

**HOWARD UNIVERSITY**

Please email the completed form to the Office of the Secretary at:

**os@howard.edu**

**INSTRUCTIONS:** *Death Resolutions are prepared for members of the Howard University community who are **Alumni**, current and former **Employees** (faculty and staff), **Students**, **Trustees/Trustees Emeriti**, and **Friends of the University** and the **Close Relatives** (spouse, parents and children) of members of the University community by the Office of the Secretary. Resolutions are addressed to the **Deceased's Next-of-Kin** and signed by the **President of the University**. Resolutions may be presented at the funeral or memorial service by a Howard University representative upon request. Please provide all applicable information and return to the email address or fax number provided above. Thank you.*

**Name of Deceased (Mr./Ms./Mrs./Dr./Other):** \_\_\_\_\_

**Date of Birth:** \_\_\_ / \_\_\_ / \_\_\_      **Date of Death:** \_\_\_ / \_\_\_ / \_\_\_      **Gender:**  M /  F

**Funeral/Memorial Date:** \_\_\_ / \_\_\_ / \_\_\_      **Date Resolution needed:** \_\_\_ / \_\_\_ / \_\_\_

**Funeral/Memorial Address:** \_\_\_\_\_

- If the Deceased was an Alumnus or Student, please provide date(s) of Graduation and Degree(s): \_\_\_\_\_

Campus Affiliations: Organizations, Activities: \_\_\_\_\_

- If the Deceased was an Employee (Faculty or Staff) of the University, please provide: Hire Date: \_\_\_ / \_\_\_ / \_\_\_  
End Date: \_\_\_ / \_\_\_ / \_\_\_      Position Title(s) and Department(s): \_\_\_\_\_

*Please provide additional details about the Deceased on a separate sheet and/or by attaching an obituary or biography.*



**Next-of-Kin's Name and Mailing Address:** (Mr./Ms./Mrs./Dr./Other): \_\_\_\_\_

\_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Relationship to Deceased (*Spouse, Parent, Child, etc.*): \_\_\_\_\_

Relationship to University, if any, (i.e., Alumnus, Employee): \_\_\_\_\_



**Name of Requestor**, if different from Next-of-Kin: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ Will the Resolution be picked up?  Yes  No

If "No", the Resolution will be mailed to the Next-of-Kin at the address provided above unless specified here:

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_