

## DIPLOMA REPLACEMENT REQUEST

UOG STUDENT ID #: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

FULL NAME: \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN (IF APPLICABLE)

MAILING ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE #: \_\_\_\_\_

DEGREE EARNED: \_\_\_\_\_ YEAR EARNED: \_\_\_\_\_

MAJOR: \_\_\_\_\_

I WISH TO HAVE MY NAME APPEAR ON MY DIPLOMA AS FOLLOWS: (PLEASE PRINT)

\_\_\_\_\_

### DELIVERY:

SELF PICK-UP OR MAY RELEASE TO: \_\_\_\_\_

TO BE MAILED (ADDITIONAL FEES APPLY): \_\_\_\_\_

### FEES:

DIPLOMA - \$100

MAIL TO U.S.A. - \$15.60 (UNDERGRADUATE) / \$20.50 (GRADUATE)

\*POSTAL RATES TO INTERNATIONAL DESTINATIONS VARY. PLEASE CONTACT ADMISSIONS AND RECORDS OFFICE FOR CURRENT FEE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

AMOUNT RECEIVED: \_\_\_\_\_ RECEIPT No.: \_\_\_\_\_ INITIALS: \_\_\_\_\_ DATE: \_\_\_\_\_