

## DIPLOMA REQUEST FORM

This form is used to reorder a diploma. Please note that we cannot process your request if you have a Bursar's hold. Please submit one form per reorder request.

Current Name: \_\_\_\_\_ ID # or SSN: \_\_\_\_\_  
(Last) (First) (MI)

Name at time of graduation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### DEGREE AWARDED: \_\_\_\_\_

#### Graduation Month and Year

- ☐ May \_\_\_\_\_  
☐ August \_\_\_\_\_  
☐ December \_\_\_\_\_

#### Academic Level

- ☐ Undergraduate  
☐ Graduate  
☐ Other \_\_\_\_\_

Dates of Attendance \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### Please note:

We must have your hand written signature in order to reorder your diploma.

It may take up to 4-6 weeks for us to receive the new diploma from our third party vendor.

We will then mail your diploma to the address you indicated above.

**\*\*A check or money order made out to Le Moyne College for \$25 must accompany this request\*\***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar's Office use only:

Date rec'd: \_\_\_\_\_ Date processed: \_\_\_\_\_

Paid: \_\_\_\_\_ Confirmation Number: \_\_\_\_\_

Init.: \_\_\_\_\_