

UNDERGRADUATE REPLACEMENT DIPLOMA REQUEST

Please return this completed form, along with a payment for the correct amount to the **Office of the Registrar, 132 Wigley Administration Center, Mankato, MN 56001**. If there is additional information or requests that the graduation department needs to be aware of please enclose that as well. (Note: This form is intended for those requesting undergraduate diplomas; if you need a new graduate diploma printed please contact the College of Graduate Studies and Research at 507-389-2321.)

To ensure privacy online, open in Adobe Reader (free at Adobe.com) Please add the required signature(s) in blue or black ink.

SECTION 1. Student Information			
NAME AS IT IS TO APPEAR ON THE DIPLOMA (please print clearly). <i>If you are requesting a diploma name that differs from the name on your records, you must submit documentation. For more information, contact the Office of the Registrar at 507-389-6266</i>			
First	Middle	Last	
Daytime phone number	Email address	Date of birth	University ID
Student signature (required)			Date
SECTION 2. Diploma Information			
Diploma mailing address (line 1)			
Diploma mailing address (line 2)			
City	State	ZIP code	Country
Recipient's daytime phone number (required for Priority Overnight or International Priority deliveries)			
PART A. Diploma #1			
Degree		Honors	Graduation date
PART B. Diploma #2			
Degree		Honors	Graduation date
SECTION 3. Order Summary			
Delivery method (all methods require 2-3 weeks processing time plus 4-5 weeks for delivery)	Quantity	Cost	Total
Regular Service: (Sent via U.S. mail; Allow sufficient time for delivery by U.S. Mail)		\$25 each duplicate diploma	
FedEx/International: Orders to be expedited, including <u>all International orders</u> . After ordering and paying for replacement diploma at \$25 each , setup mailing of the document at www.eshipglobal.com . FedEx is non-refundable.		\$25 each duplicate diploma	
Total diplomas requested:			Total amount due:
SECTION 4. Payment Information			
Requests will not be processed without payment. Send check or money order payable to Minnesota State University, Mankato, or provide credit card information (Visa, MasterCard, Discover) with card number and expiration date. <i>NOTE: Overpayment of \$5.00 or less will not be refunded.</i>			
Check one method of payment:			
<input type="checkbox"/> Cash (in-person only)			Amount enclosed
<input type="checkbox"/> Check or money order payable to Minnesota State University, Mankato			\$ _____
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover			CVV# _____
Account #: _____ - _____ - _____ - _____			Expiration date: ____ / ____
			\$ _____
A member of the Minnesota State Colleges and Universities System and an Affirmative Action/Equal Opportunity University. This document is available in alternative format to individuals with disabilities by calling the Office of the Registrar at 507-389-2321 (V), 800-627-3529 or 711 (MRS/TTY).		Office Use Only Cashier Acct# 113503 or 9199	