

Request for Replacement Diploma

Office of the Registrar, 232 Capen Hall, 716.645.5698

Complete this form and mail with payment to: University at Buffalo, Office of the Registrar, 232 Capen Hall, Buffalo, NY 14260. For questions, please call (716) 645-5698.

Cost is \$10.00 for each diploma requested (please note that payments must be in US funds; electronic funds not accepted). Please complete one form for each different degree requested (e.g.: BA and MS). Medical Students must contact 716-829-2802. Dental Students must contact 716-829-2839.

Please Print:

First Name: Middle Name:

Last Name:* Suffix:

E-Mail Address:

*This must be your name as it appeared on your U.B. records at your last date of attendance. Your name will appear on your new diploma exactly as it appears on the U.B. system. If this replacement request is due to a name change, you must also complete and submit the Name Change form (<http://registrar.buffalo.edu/pdfs/studentNameChange.pdf>) along with this form.

U.B. Person ID Number: Last 4 Digits of SSN Date of Birth

Please check one:

Certificate Associate Bachelor Master Doctorate Law

Date of Graduation: Major/Plan Title:

Mailing Address for Replacement Diploma: Check here for us to update your current permanent address with this address.

Street:

City: State/Province:

Country Zip/Postal Code:

Authorization & Signature: I have enclosed a check or money order (US funds) payable to "University at Buffalo". I am the owner of the academic records here noted and authorize you to replace my original diploma and mail it to me at the above address.

Signature: _____ Date:

Graduates who have an outstanding financial obligation to the University at Buffalo are not eligible to receive diplomas or transcripts until these obligations are settled.

For Office Use Only:

Payment Information: _____ Date Ordered: _____ Service Indicator?: _____ Received & Mailed: _____ Staff: _____