



CERTIFIED COPY OF DIPLOMA FORM

Personal Information:

Last: \_\_\_\_\_ Middle: \_\_\_\_\_ First: \_\_\_\_\_

Previous/Maiden: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Creighton NetID (if known): \_\_\_\_\_

Contact Information:

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Diploma Request Details:

Degree received: \_\_\_\_\_ Degree date (mm/yyyy): \_\_\_\_\_

Please note that Creighton University only has copies of BSN, MSN, Professional and Doctoral degrees on file.

Mail or Email diploma to (please provide mailing address or email address or both, if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special instructions: \_\_\_\_\_

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

Form may be returned:

Email to Registrar@creighton.edu OR

Fax at 402-280-2527 OR

Mail to: Creighton University, Registrar's Office, 2500 California Plaza, Omaha NE 68178

Questions should be directed to the Registrar's office: registrar@creighton.edu or 402-280-2702