

## ADDITIONAL/REPLACEMENT DIPLOMA REQUEST FORM

Office of the Registrar

**Personal Information** 

The fee for additional and/or replacement diploma prints is \$50.00 per diploma.

Last:	Middle	First:
Last: Last name when Degree earned (if different):		Thst
Date of birth:	NetID (if known)	
<b>Contact Information</b>		
Phone:	Emai	l address:
Diploma Request Details		
Name as you wish for it to appear on the	e diploma:	
Name of Degree:	D	egree date:
Mail diploma to:		
Special instructions:		
Signature:		Date:
		s current diploma and current officials' signatures.
2. Contact the Student Records/Financial S	ervices Office at	University, to the address below, OR 402.280.1110 to make a credit card payment via phone then email registrar@creighton.edu and attach the form

Creighton University Office of the Registrar 2500 California Plaza – Omaha, NE 68178

Questions may be directed to the office at 402-280-2702 or registrar@creighton.edu