



Enrollment and Student Services
 Office of the University Registrar
 3301 College Avenue • Fort Lauderdale, Florida 33314-7796
 (954) 262-7200 • 800-541-6682 • Fax (954) 262-3256

REQUEST FOR REPLACEMENT DIPLOMA

To request a replacement diploma, submit this completed form along with a \$30 fee for each diploma to the Office of the University Registrar. To submit payment by check, payable to NSU, mail this request to the address listed above, or submit the request along with your payment to the One-Stop-Shop located in the Horvitz and Terry Administration Buildings on the main campus in Fort Lauderdale. To submit payment by credit card, complete Section II and fax this form to (954)262-3256.

Name: _____ NSU ID/SSN: _____

College/Program _____ Degree: _____ Degree Date: _____

Section I: Diploma Information

Please print your name EXACTLY as you want it to appear on your diploma.

<i>First</i>	<i>Middle(optional)</i>	<i>Last</i>
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Is this request for a replacement diploma due to a legal name change? Yes No

Do you want your student record to reflect the name change? Yes No

*If yes, you must include legal documentation, such as a copy of your driver's license or passport.
 Note: Social Security and voter's registration cards will not be accepted as legal documentation*

Address to which the diploma is to be mailed (no P.O. boxes):

Street: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

Do you want your student record to reflect the update of your address and phone number? Yes No

How many copies of your diploma would you like? _____

Please submit a \$30 fee for each.

Section II: Credit Card Authorization

I hereby authorize a charge to be made to my:

Visa MasterCard American Express

Amount: \$ _____

Account Number: _____ Expiration Date: _____

Cardholder's Name: _____

Billing Address: _____

Street, City, State, Zip

Signature _____ Date _____