

**St. Edward's University Office of the Registrar
Diploma Order Form**

STUDENT INFORMATION

Name: _____
Your name will be printed as listed on your academic record.

SEU ID or SSN: _____ Birthdate: _____

Address: _____

City & State: _____ Zip: _____

Daytime Phone: _____

DEGREE OR CERTIFICATION INFORMATION

*Only the degree or certificate awarded (not the major, minor, or concentration) is printed on the diploma.
This diploma reprint will include the current President and Executive Vice President signatures.*

Degree or Certificate Awarded: _____

Date Awarded: _____ Honors Awarded: _____

DIPLOMA REPRINT FEES

Diploma or Certificate \$9.00 each Quantity: _____ Amount Due: _____

Diploma Cover \$8.00 each Quantity: _____ Amount Due: _____

Check one please.

_____ I will pick up the Diploma/Certificate in the Office of the Registrar.

_____ Mail my Diploma/Certificate to the address listed above.

Signature: _____ Date: _____

For REGR Office Use Only

Amount Paid: _____ Processed By: _____ Verified By: _____

Date Mailed or Picked Up: _____

Revised 07/25/2008 (diplreprint.doc)