

UNIVERSITY of
INDIANAPOLIS.

Request for Replacement Diploma Form

Office of the Registrar • 1400 East Hanna Avenue • Indianapolis, IN 46227
(317) 788-3219 • 1-800-232-8634 • Fax: (317) 788-3254

DIRECTIONS: Complete the form below and mail with payment to *Roberta Hurst* at the address listed above. For any questions, please call (317) 788-3220.

Please Note: All financial obligations to the University must be paid before any diplomas or transcript(s) will be released.

Name and Contact Information (Please print or type clearly)

Full Legal Name: _____
Last Name* First Name Middle

*At your last attendance. Your name will be printed exactly as it appears in our system. The replacement diploma will also indicate "Duplicate of Original Diploma" in fine print.

Student ID Number or Last 4 Digits of SSN: _____ Telephone: _____

Email Address: _____

Replacement Diploma Order (\$10.00 per diploma)

Please check diploma type: Associate Bachelor Master Doctoral

Years of Attendance: _____ Year of Graduation: _____ Major Field: _____

Authorization:

I understand that I may only order a replacement diploma if my original diploma has been lost or damaged. I am the owner of the academic records here noted and authorize the University of Indianapolis to replace my diploma and mail it to me.

Student Signature: _____ Date: _____

Delivery Information for Replacement Diploma (via Certified Mail)

Name: _____

Name of Company/Department/School (if applicable): _____

Mailing Address: _____
Number and Street City State Zip

Method of Payment

Note: Payment must be received in full prior to release of diploma. Please make all checks and money orders payable to the University of Indianapolis.

Check (Check #: _____) Money Order Credit/Debit Card: MC VISA DSCV AMEX

Card number: _____ Exp. Date: _____

Name on Card: _____

Signature: _____