



Please note: All diploma re-orders must be accompanied by official documentation if a name change has occurred following your degree certification. This documentation may include: copy of a marriage certificate or divorce decree. Requests will not be processed without sufficient documentation.

(Please print)

Name _____
First Middle Last Maiden/Other

Social Security # _____ ID Number _____

Mailing Address _____

Email Address _____

Telephone Number _____

Name as stated on present degree: _____

Name on diploma reorder _____

Degree Type:

Doctorate Master Bachelor Associate Certificate

Degree Name: _____

Degree Concentration: _____

Date Degree was Conferred: _____ Honors _____

Number of Copies Requested: _____

Cost: \$50 per diploma

Method of payment:

_____ Check or money order attached (payable to University of Charleston)

_____ Credit Card

_____ Card Number Exp. Date Security Code \$ Amount

Student Signature _____ Date _____

Please submit the completed form to Carol Spradling -Registrar, University of Charleston, 2300 MacCorkle Ave SE, Charleston, WV 25304 or you can scan and email it to carolspradling@ucwv.edu.

For Office Use Only

Degree Verified _____ Registrar _____ Date Ordered _____