

Diploma/Certificate Replacement Request Form

PLEASE COMPLETE THE BELOW:

- First, check the box selecting the product option
- Second, check the box selecting the shipping option
- Third, submit paper request with payment

REPLACEMENT OPTIONS:		
*DIPLOMA FEES:	Check Box	Number of Replacement
\$20.00 Each Replacement Diploma (REPLDIPLOMA)	☐ I would	d like Diploma(s)
\$20.00 Each Replacement Diploma Cover (DIPLOMACO)	ver) 🗌 I would	d like Cover(s)
*Graduation/Commencement fees include 1 original diploma	a with cover.	
CERTIFICATE FEES:		
\$10.00 for each Certificate (CERTIFICATE)	☐ I woul	d like Certificate(s)
(Graduate/Post-Baccalaureate Only)		
SHIPPING OPTIONS:		
DOMESTIC DESTINATION:		Check Box
*Standard Service – included w/Replacement Option	n Fees	
Rush Service (10 business days) - \$90.00 (GOLDRUSHDIP)		
INTERNATIONAL DESTINATION (Pricing varie	es from \$90	.00 - \$250.00)
Service Options — Call for exact pricing (916) 278-7757 (INTLRUSH)	⁷ or (916) 278-10	000 [Select Option 4]
 Orders are bulk processed for printing, with deliver documents submitted, and are then mailed out in b 		etion of all

PAYMENT (Options Currently Available):

CHECK/MONEY ORDER PAYABLE TO SACRAMENTO STATE

Mail Option – Sacramento State, Bursar's Office 6000 J Street, Lassen Hall, MS 6052 Sacramento, CA 95819 Submit in Person – Sacramento State, Bursar's Office Lassen Hall, Room 1001

REQUIRED INFORMATION TO COMPLETE YOUR REQUEST

Please clearly provide the below information in blue or black ink NAME will print on the diploma as completed in the fields below

Legal Name:		
First:	Middle:	Last:
Diploma Name (Comple	te only if you would like this name	on the Diploma):
First:	Middle:	Last:
Student ID #:	Date of Birth: Month	: Day:
DECDEE INFORMAT	TON.	
DEGREE INFORMAT Degree Type:		
	S, MA, MS, etc.)	
Graduation: Semeste	er: Year: _	
Major:		
CERTIFICATE INFOR		
Certificate Of:		-
Certificate Issued: Se	mester: Yea	ar:
ADDRESS EOD SH	IPPING INFORMATION O	NII V•
ADDRESS FOR SH	IFFING INFORMATION O	INLT.
	or PO Box:	
Street Name/Number of		
•		
City/State/Zip Code:		
City/State/Zip Code:	<u></u> r:	
City/State/Zip Code: Daytime Phone Numbe		
City/State/Zip Code: Daytime Phone Numbe Email:		
City/State/Zip Code: Daytime Phone Numbe Email:		
City/State/Zip Code: Daytime Phone Numbe Email: Total fees included wit		