

Diploma Replacement Request Form

William E. Simon Graduate School of Business Administration
University of Rochester
Registrar's Office, 305 Schlegel Hall, Box 270107
Rochester, NY 14627
Phone: (585) 275-3533 / Fax: (585) 271-3907



SIMON
GRADUATE SCHOOL OF BUSINESS
UNIVERSITY OF ROCHESTER

Directions:

- All requests for replacement copies of a diploma must be done in writing and must include the information listed below.
- Mail this form with your check/money order to the address listed above.
- The replacement charge is \$35.00 per diploma, payable to the University of Rochester – Simon School.
- Diplomas will be mailed within 4 to 6 weeks after the request is received.
- Please indicate the address where the diploma is to be mailed.

Student Name: _____ **Today's Date:** _____
Please print Last First MI Mo. Day Yr.

Student signature (required): _____

UID# or Social Security #: _____ **Date of Birth:** _____
Mo. Day Yr.

Prior Name: _____
(If you attended the Simon School under a different name, please indicate above.)

I graduated from the Simon School: Year _____ Degree _____

Diploma Mailing Address:

Name _____

Address _____

City/State/Zip _____

Phone Number _____ / _____ **E-mail address:** _____
Area Code

Mail this form with your Check/Money Order to:

William E. Simon Graduate School of Business Administration
University of Rochester
Registrar's Office, 305 Schlegel Hall, Box 270107
Rochester, NY 14627

Registrar's Office Use Only:

Date received/by: _____

Date processed: _____