



DIPLOMA REPLACEMENT FORM

This request form must be completed by the GRADUATE. Forms received without the written signature of the graduate for whom the diploma was granted will not be processed until this consent is received.

We will order your diploma upon receipt of both your completed form and check. We can also accept payment via check or cash in person at our office located at Belmont Central on campus.

<p><i>*Please make check payable to Belmont University, and mail payment to:</i></p> <p style="text-align: center;">Office of the Registrar Belmont University 1900 Belmont Boulevard Nashville, TN 37212-3757 (615) 460-6619</p>	<p>Select One:</p> <p style="text-align: center;">() electronic PDF of diploma - \$5</p> <p style="text-align: center;">() diploma insert only* - \$35</p> <p style="text-align: center;">() diploma insert and cover* - \$50</p> <p style="text-align: center;"><i>*Please allow up to 2 weeks for delivery.</i></p>
--	---

- Graduate's Name:
(As it was on the date of graduation): _____
- Graduate's Name:
(As desired to appear on the replacement diploma): _____

Degree Earned: _____ Date of Graduation: _____
 BUID/SSN: _____ Phone: _____

SIGNATURE of GRADUATE: _____ **DATE** _____

PLEASE CHECK AND COMPLETE **ONE** OF THE FOLLOWING SENDING OPTIONS

1. **MAILING ADDRESS:** (Please note that diplomas are mailed through express shipping services and will possibly require someone to be present to sign for the package when it is delivered.)

 (Street, City, State, & Zip)

2. **PICK UP:** I will picking up my own diploma OR I am granting permission for (name) _____ to pick up my diploma on my behalf

FOR OFFICE USE ONLY:

Check Information		Graduation/Diploma Information	
Check #		BUID:	
Amount:		Term:	
Date:		Date:	
Processed by:		Processed by:	

Please return to Belmont Central in the Gabhart Student Center or via: **Fax:** 615-460-5415 or **Email:** registrar@belmont.edu
Phone: 615-460-6619