

Duplicate Diploma Request Form

(Please print legibly)

Name (as it should appear on your diploma): _____

All information will be verified against UNMC records for accuracy. **NOTE:** A diploma cannot be issued with a name not in our database. If your name has changed since graduation and you would like that name on your diploma, please send in a copy of an official document (driver's license or marriage certificate, etc.) with your new last name so we can update our student database.

Current Phone Number: _____

Email Address: _____

Degree Received: _____

Date of Degree: _____

Domestic diplomas are mailed via USPS and require a signature for delivery. If your mailing address is outside of the US, you will need to order a prepaid shipping label (<https://study.eshipglobal.com/> - Click on Student/Scholar Login).

Mailing Address to Send Diploma: _____

Your Signature: _____

Date: _____

Signature of Notary: _____

Notary Stamp:

Payment Information:

The charge for a duplicate diploma is **\$30.00**. Please choose a payment option below.

Pay By Check:

Please make \$30 check payable to
University of Nebraska Medical Center
 and mail this completed form along with
 payment to:

**University of Nebraska Medical Center
 Academic Records
 984230 Nebraska Medical Center
 Omaha, NE 68198-4230**

Pay By Credit Card:

Return this completed form to our office by mail or email (academicrecords@unmc.edu):

Credit Card Information –

 Name on Card

 Type (Visa/Mastercard)

 Credit Card Number

 Expiration Date

 CCV/Security Code

(The CCV/Security Code is a 3 or 4 digit number, typically on the back of your credit card.)

UNIVERSITY USE ONLY: Approval Signature _____ Date _____