

Order Form for Duplicate Diploma

Name: _____
(Please print as indicated on TCU academic records)

Degree Awarded: _____

Date of Degree: _____

Latin Honors: _____

Date of Birth: _____

SS/TCU id: _____

Address for Mailing Diploma: (note it will be mailed certified. Someone will have to sign for it)

Paid Yes No

Credit Card Number _____

Expiration Date _____

Visa, Mastercard, American Express, Discover (please circle)

Telephone Number: _____

Date Requested & Ordered: _____

Date Mailed: _____

NOTE: The cost of a replacement diploma is \$50. The format and design of this diploma will be the one that is used at the present. A disclaimer of "reprint of original" will be printed in the lower left corner of the diploma.

Please send to:

Kristi Harrison

TCU Box 297004

Fort Worth, TX 76129

Scan & Email: k.harrison@tcu.edu

Phone: 817-257-5090, Fax 817-257-6400