

AUGUSTANA UNIVERSITY
DIPLOMA RE-ORDER REQUEST FORM
Office of the Registrar, 2001 S Summit Avenue
Sioux Falls, SD 57197 605.274.4121 (Office)
registrar@augie.edu

NAME: _____ **DATE:** _____

FORMER NAMES: _____

AU ID # OR SSN: _____ **BIRTHDAY:** ____/____/____

PHONE NUMBER: _____ **EMAIL ADDRESS:** _____

Requesting replacement diploma for:

- Bachelor's degree
 Master's degree

*** If there are any holds on your record, a diploma will not be issued until all holds are cleared. ***

Specific Directions

Name exactly as you want it to appear on your diploma: _____

Diploma Type Requested:

- Electronic only (*Lifetime access through Parchment*): \$25
 Paper and electronic copies: \$50
 I would like a diploma cover: \$10 (*Please note: diplomas are 8 1/2 x 11*)

Diploma Mailing Information

(Diplomas are mailed to the address exactly as requested.)

International Addresses require an additional \$20 to cover shipping costs.

Name: _____

Address: _____

Credit Card Information (If paying by check, make the check payable to Augustana University.)

Card Number: _____ CSV code _____ Mastercard VISA Discover AmEx

Cardholder's Name: _____ Expiration Date: __/__/__ Amount to be charged: \$_____

Cardholder's Address: _____

Signature (required): _____ Date: _____

Office use only:

Payment received/processed: ___ Student ID Number: _____ Verify Degree Date: __/__/__ Honors: _____

Amount Charged: _____