



Replacement Diploma Request

Date _____ NU ID or last 4 digits of SSN _____ Birthdate _____

Please print full name as it appears on original diploma

 First Name Middle Name Last Name

 Degree Earned Major Date Degree Awarded

Reason for Application

- Original diploma has been lost or destroyed
- Name change. Request for a diploma to be issued in new name and change of name on University record. **Submit a Change of Personal Information form with required documentation. This request cannot be processed without the Change of Personal Information form and documentation.**

Please print your name as you wish it to appear on your diploma:

 First Name Middle Name Last Name

Please send the diploma to the following address:

 Address City State Zip Code

 First Name Middle Name Last Name

 Phone Number Email Address

I understand that the replacement diploma will bear the signatures of the current officials of the state and the University. I hereby certify that the information provided is true and correct.

 Signature Date

Instructions

1. The replacement diploma fee is \$30.00. Submit completed form(s) and check, payable to the University of Nebraska Omaha, to the Office of the University Registrar, 6101 University Drive North, Eppley 105, Omaha NE 68182
2. Diplomas are ordered at the beginning of the month. Allow one month for delivery of replacement diploma.
3. University financial obligations must be paid before your diploma can be issued. If you have a financial hold, please contact the Cashiering/Student Accounts office by phone at 402-554-2324 or by email at unocsa@unomaha.edu.

