



Request for a Replacement Diploma

Name: _____
As it appears on your diploma.

Degree: _____ Semester: _____ Year Granted: _____

Date of Birth: _____ USD ID#: _____

Phone Number: _____ Email: _____
(required)

Address to which your diploma should be sent (required).

Street: _____

City: _____ State: _____ Postal Code: _____

Signature: _____ Date: _____
Diploma will not be ordered without a signature.

Please submit your request along with the appropriate payment to:

Student Financial Services	regular replacement \$25 (domestic USPS)
University of San Diego	regular replacement \$35 (international)
5998 Alcalá Park	rush replacement \$150 (domestic)
San Diego, CA 92110	rush replacement \$175 (international)

Comments: