



UNDERGRADUATE DIPLOMA REPLACEMENT FORM

Diploma Name *(please print clearly)*

Last	First	Middle

Diploma name is not required to match the primary/legal name. Your first and middle names will be printed on your diploma to match this form.

CofC ID (CWID) **-- OR** Social Security Number (Last 4 Digits)

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Degree Information

Degree (AB/BS/BA/BPS/BGS)	Major(s)*	Latin Honors?	Graduation Date

Number of Diplomas ordered (\$25 each)	Notarization requested?**

*minors and concentrations are not printed on the diploma but will be included on transcripts
 **Notarization may be required if the diploma will be used as a credential or if certification with an Apostille at the SC Secretary of State's office is required.
 Notarization will cause a delay in processing and will incur an additional processing fee of \$15.00.

Student Contact Information

Email	Phone Number

Diploma Mailing Address

Street	City	State	Zip

I certify that all the information provided by me on this form is correct and complete.

	____ / ____ / ____ Month Day Year
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Signature

Date

Please return this form to graduation@cofc.edu, in person at the Registrar's Office, or via postal mail to Registrar's Office—Graduation, College of Charleston, 66 George Street, Charleston, SC 29424.

Fees are subject to change without notice. Please allow 4-8 standard weeks for standard processing. Diploma orders are processed as quickly as possible, but date of delivery is estimated and not guaranteed. For expedited services, contact our office; extra fees will apply.

Contact the Treasurer's Office at 843-953-5572 for payment options.

<i>RO Office Use Only</i>	Processed by: _____ (RO Staff Initials) Amount charged/date paid: _____ / _____
	Date ordered: _____ / _____ / _____ DO#: _____