Request for Duplicate Diploma

**Mail:** UNC at Pembroke

# Office of the Registrar OR: **Fax:** 910-521-6328

P.O. Box 1510 Pembroke, NC, 28372

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| **UNCP ID** | **8** | **4** | **0** |  |  |  |  |  |  |

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| **Student Information****(Your name will appear on your diploma as it does in our student information system records. If your name has changed since you****graduated, you must complete a Name Change Request Form.)** |
| **Full Name (as it should appear on your diploma)** |
| **Name at time of Graduation** | **Date of Graduation****T E R M / Y E A R** |
| **Major at time of Graduation** |
| **Email Address** | **Telephone Address** |

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| **Diploma Mailing Address** |
| **Street Address/PO Box** |
| **City** | **State** | **Zip Code** |

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| **Degree Information** |
| **Type of Degree** | **Honors Received** |
| (BA) | Bachelor of Arts |  | Summa cum Laude |  |
| (BM) Bachelor of Music |  | Magna cum Laude |  |
| (BS) Bachelor of Science |  | Cum Laude |  |
| (BSN) Bachelor of Science in Nursing |  | University Honors College |  |
| (BSW) Bachelor of Social Work |  | Chancellor’s Scholar |  |
| (MA) | Master of Arts |  | **FEES INCLUDE:**$25.00 for Duplicate Diploma$10.00 for Diploma Cover |
| (MS) | Master of Science |  |
| (MAE) Master of Arts in Education |  |
| (MBA) Master of Business Administration |  | Duplicate Only |  |
| (MPA) Master of Public Administration |  | Duplicate & Cover |  |
| (MSA) Master of School Administration |  | Cover Only |  |

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| **Student/Alumni Signature** |  | **Date** |
| **Cashier Signature** |  | **Date** |

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| **Office Use Only** |
| **Semester Awarded Date** | **Degree Awarded Date** | **Major** |
| **Receipt Number** | **Date****of Order** | **Staff Initials** |

\*This publication is available in alternative formats upon request. Please contact Disability Support Services, DF Lowry Building, 910-521-6695