



STUDENT INFORMATION

Student Name: _____ Date: _____

Student ID # (or SSN, if unknown): _____

Email: _____ Phone: _____

Student Signature: _____

Student signature must be handwritten.

DIPLOMA INFORMATION

Full Name (as it should appear on the diploma): _____

Note: If you are requesting a replacement diploma with a different name than when you attended Virginia Tech, you must first request an official name change and provide two pieces of supporting ID. Go to registrar.vt.edu under Student/Family Resources click Update Personal Information. Email name change questions to registrar@vt.edu.

Degree Level: Undergraduate Graduate

Degree/Certificate Program: _____

Term of Completion: Spring Summer Fall Winter Year: _____

Name of additional degree(s)/program(s), if requesting a diploma for more than one program:

Number of copies (\$20/copy): _____

Address to which diploma(s) should be mailed:

Note: If you are having your diploma(s) shipped to another person, please include their name.

<p>Replacement diploma fee information:</p> <p>\$20 per copy Check/money order payable to: <u>Treasurer of Virginia Tech</u> Cash accepted, but not encouraged in mail Electronic payments and credit cards <i>not</i> accepted</p>	<p>Submit your completed form and payment to:</p> <p>Office of the University Registrar (MC 0134) Student Services Building, Suite 250 800 Washington St., SW Blacksburg, VA 24061</p>
---	--