

DIPLOMA REPLACEMENT FORM

| STUDENT INFORMATION | | |
|--|----------------------------|------------------|
| Name (as it appears on your McMaster record) | Student Number | |
| Email | Date of Birth (DD/MM/YYYY) | |
| Degree Conferred | Year of Graduation | Telephone Number |

| SECTION A: DIPLOMA REPLACEMENT (Select 1 of 3 options) | | ✓ |
|---|---|---|
| 1) Original Replacement (Incorrect by University) | No Charge | |
| 2) Unclaimed by Student (Destroyed by University) | \$50.00 | |
| 3) Duplicate (Second Copy) | \$50.00 | |
| 4) Re-Issue Indicate reason: <input type="checkbox"/> Lost <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Name Changed | \$50.00 <i>Please note that for Damaged/Name Changed, the <u>original diploma must be returned</u></i> | |

| SECTION B: METHOD OF DELIVERY (Select 1 of 3 options) | | ✓ |
|---|-----------------------------|---|
| 1) Pick Up | No Charge | |
| 2) Mail (Canada Post) | \$25.00 | |
| 3) Courier (FedEx) | \$_____ (FedEx Rates Apply) | |
| Mailing/Courier Address (If applicable): | | |

| SECTION C: METHOD OF PAYMENT (Cheques, Money Orders or Cash are <u>NOT</u> accepted) | | |
|---|---|--|
| 1) Credit Card | Name on credit card: | |
| <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex | Credit Card Number: | |
| | Expiry Date: | |
| | Cardholder's Signature: | |
| 2) Debit (IN PERSON ONLY) | <i>For Office of the Registrar Use Only</i> | |
| | Amount: | |
| | Receipt Number: | |
| | Receipt Date: | |
| | Processed By: | |
| Signature | Date | |

FIPPA Notice – Refer to Senate Policy at www.mcmaster.ca/privacy/fippa/docs/FIPPA_Statement.pdf
 You may return this form by fax to (905)527-1105 or upload it to our McMaster secure link at:
<http://macdrive.mcmaster.ca/u/d/c18bbaf514/>