

**West Texas A&M University
Request for Replacement Diploma**

Date _____ Social Security Number _____

Date of Birth _____ Graduation Date _____

Name (as you want it to appear on the diploma)

Mailing Address _____

City, State, Zip _____

Email _____

Phone Number (required for delivery outside the U.S.) _____

Diploma Only (\$14 Fee)

Diploma With Cover (\$20 Fee)

I am requesting a replacement diploma because:

Signature _____

DO NOT WRITE BELOW THIS LINE.

Information to be completed and verified by the University Registrar:

LEGAL NAME _____

GRADUATION DATE _____ DEGREE _____

MAJOR _____ HONORS _____

Registrar Signature _____ Date _____

RETURN FEE AND COMPLETED FORM TO:

WTAMU Alumni Association
WTAMU Box 60753
Canyon, Texas 79016-0001

Please allow 10-12 weeks for delivery. For more information, call (806) 651-2311 or email alumni@mail.wtamu.edu.