



Registrar's Office 4201 S. Washington St. Marion, IN 46953 |

Email: registrar@indwes.edu | Fax: 765-677-2662 | Tel: 765-677-2131

REQUEST FOR REISSUANCE OR DUPLICATE DIPLOMA

Submission Instructions

1. Please print and complete this form in its entirety and email, mail, or fax to the Registrar's Office as listed above.
2. Upon review of your form, the IWU Registrar's Office will send you an email with a ShopSite payment link.
3. A ShopSite receipt will be delivered to you and the Registrar's Office, at which time your diploma will be sent.

Student Information

Name: _____
(Last) (First) (Middle) (Maiden)

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Cell Phone #: _____

Student ID#: _____ or Date of Birth: _____

Year Graduated: _____ Email Address: _____
(Please Print)

Type of Request

☐ **Reissuance** (Requests are for those graduates whose name has legally changed. *Please see statement

☐ **Duplicate** (Requests are to replace an original.)

***Reissuance of Diploma:** If you are requesting the diploma to be reissued with a new name, proof of name change in the form of a certified copy of a marriage license, court order, or dissolution decree reflecting the new name in full must be provided. The diploma will contain a typed statement on the front that it has been reissued.

☐ Document attached _____

Name (as you wish it to appear on diploma): _____
(Please Print)

Please list the number of diplomas requested by each degree type.

_____ \$15 for each standard diploma

_____ \$20 for MBN dual degree

_____ \$10 for each diploma cover

Please circle which diploma(s) you are requesting:

Associate's Bachelor's Master's

_____ \$25 for each doctoral diploma

Diplomas are processing within 7-10 business days of receiving your request with additional time for USPS delivery. Please call for FedEx delivery fee. Please check here _____ to request FedEx delivery.

Signature: _____

Date: _____