SOUTHWESTERN UNIVERSITY

REPLACEMENT DIPLOMA REQUEST FORM

In accordance with the Family Educational Rights and Privacy Act of 1974, as amended, student academic records are classified as confidential, and may be released ***only with the student's written authorization and signature***.

- ☐ Paper Diploma only (Domestic mail: $20; International: $65)
- ☐ Digital diploma only ($5 processing fee)
- ☐ Both paper diploma and digital diploma (Domestic mail: $20; International: $65)

STUDENT INFORMATION

Name: _____ _____ _____
Last First Middle

Name at time of attendance, if different from above: _____

Student ID or SS#: _____ Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Graduation Year: _____ Degree & Major: _____

Notes/Comments: _____

_____

_____

_____

Student Signature: _____ Date: _____

Please mail completed form and payment to:

Southwestern University
Office of the Registrar
1001 E. University Avenue
Georgetown, TX 78626

Office of the Registrar ● 1001 E. University Ave ● Georgetown, TX 78626
Phone & Fax: 512-863-1952 ● registrar@southwestern.edu