

**The College at Brockport
State University of New York
Office of Registration and Records**

REPLACEMENT DIPLOMA FORM

Students who have lost or damaged their SUNY Brockport diplomas may request a replacement diploma for \$15.00. Please complete this form and return it with your payment to the Office of Registration and Records (address below). We will make every effort to fulfill your request as soon as possible.

Please complete your full name below as you wish it to **appear on your replacement diploma**:

First name	<input type="text"/>	Last name if different while in attendance	<input type="text"/>
Middle/Maiden	<input type="text"/>		
Last name	<input type="text"/>		

Social Security Number or Banner ID	<input type="text"/>	Daytime Phone #	<input type="text"/>									
Degree Type (circle diploma requested)	BA	BFA	BPS	BS	BSN	MA	MFA	MPA	MS	MS in Ed	MSW	CAS
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date of Degree	<input type="text"/>	<input type="text"/>	Major/Graduate Program	<input type="text"/>				
	month	day	year		month	year						
Mailing Address - Please send diploma to:												

(PLEASE PRINT)												
street address				city				state		zip		

Replacement diplomas are \$15.00 each. Payment may be made by check, money order or credit card. Please indicate below.	
<input type="checkbox"/> Payment by check \$_____ enclosed (Please make check payable to SUNY Brockport).	
<input type="checkbox"/> Payment by money order \$_____ enclosed	
<input type="checkbox"/> Payment by credit card \$_____ VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/>	
Credit Card # _____	Expiration date: _____ / _____ month year

Student's Signature

_____/_____/_____
date

Please mail the replacement diploma form to:

Office of Registration and Records
SUNY Brockport
350 New Campus Drive
Brockport, NY 14420-2966

Phone: (585) 395-2531-- **Fax:** (585) 395-5392