Duplicate Diploma Request Form

Email completed form to degaudit@nmu.edu. (Request cannot be completed without signature authorizing release of information). Once completed form is received, diploma information will be verified and uploaded to the diploma printing vendor website. After information has been uploaded to the vendor website, you will receive an email from the vendor with the website link and a secure id which is needed to complete the order online through the vendor.

NMU IN: _____ **Email Address:** _____

First Name: **Street Address:** _____

MIddle Name: **City:** _____

Last Name: _____ **State:** _____ **Zip Code:** _____

Date of Birth: _____ **NMU Start Date? (Month/Year):** _____

Former Name(s): _____ **NMU End Date? (Month/Year):** _____

Duplicate Diploma Requesting:

☐ **Certificate** **Date of Graduation:** _____

☐ **Associate Degree** **Date of Graduation:** _____

☐ **Bachelor Degree** **Date of Graduation:** _____

☐ **Master Degree** **Date of Graduation:** _____

Name as you would like it to appear on diploma:

(Must be legal name, documentation required, if name differs from NMU record).

_____

Signature: _____ **Date:** _____

*(**Signature Required** for release of information.)* I understand that my diploma will not be released if any financial obligations to NMU have not been satisfied.