



Diploma Reorder Form

Last Name _____ First Name _____ Student J# or SS# _____

Phone _____ Email _____

Check the degree that you completed: _____ Date Degree Was Earned _____

☐ PhD ☐ EdD ☐ DrPH ☐ EdS ☐ MEd ☐ MSW ☐ MS ☐ MPH ☐ MPA ☐ MPPA ☐ MMed ☐ MBA ☐ MAT ☐ MA
☐ BA ☐ BBA ☐ BM ☐ BMED ☐ BS ☐ BSEd ☐ BSW ☐ B.US ☐ Certificate

Major _____ Concentration/Option _____

Major _____ Concentration/Option _____

Print your name exactly (including capitalization) how you would like it to be displayed on your Diploma

Name _____
First name Middle Last name

If the name to be printed on the Diploma differs from your name when you were a student (usually due to a name change), please provide us with your previous name and include documentation of the name change (marriage certificate, driver's license, etc) with your order.

Previous name at time of graduation _____
First name Middle Last name

Please check how you would like to receive your Diploma: ☐ **Mail** ☐ **Pick-up**

If you selected pick-up, we will hold your diploma in the Office of the Registrar and Records until you can come and claim it. If you selected mail, please provide us with your complete current mailing address below.

Street _____ City/Town _____ State _____ Zip _____

The cost is \$60.00 per diploma and the normal processing time is 6-8 weeks.

Please include your check or money order made payable to Jackson State University and mail to:

- Jackson State University,
- Registrar's Office/ Degree Auditor,
- P.O. Box 17125, Jackson, MS 39217

Student Signature _____ Date _____

Please return this form to the registrar's office via the methods noted below.

Processed by: _____	Date _____	08/2022
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