

**Replacement Diploma Request**

Your name as it appears on the original diploma:

\_\_\_\_\_  
Last First MiddleStreet Address: \_\_\_\_\_  
City State Zip

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Other Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Degree: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Student I.D. Number: \_\_\_\_\_

Please fax, email, or mail this form to the address below.

I hereby certify to the best of my knowledge and belief that my original diploma is lost or destroyed subsequent to my graduation from the University.

Please note that diplomas are issued in the format currently used and bear the signatures of the present University officers. The statement "This diploma is reissued" and the date will appear at the bottom edge of the replacement of diploma.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**Degree Verification: \_\_\_\_\_  
Date InitialsFinancial Clearance: \_\_\_\_\_  
Date Initials**Western International University**%\$%K r: ci bHJb\ YUX'DUf\_k Um  
HYa dY, AZ 852, &  
Phone: 602.943.2311  
Toll free: 866.948.4636  
Fax: 602.383.2210Email: [wiuosr@west.edu](mailto:wiuosr@west.edu)