

## California State Polytechnic University, Pomona Registrar's Office

For office use only:						
Received on:						
Order processed on:						
Ву:						

## **DUPLICATE DIPLOMA REQUEST FORM**

Identification							
Last Name	First		Middle Initial	Student's	Bronco Number		
Date of Birth:		Daytim	e Phone No.:				
Email Address:							
Diploma Information							
Name as listed on diploma:							
Degree (example: BS or BA):			Graduation Date:				
Major:		Minor:		Honors:			
Mailing Information: Please indicate the complete address of where your diploma should be mailed.							
Number and Street Address							
City	State	)		Zip			
Pick-up Information: Daytime phone	number is r	equired.					
Yes, I will pick-up my diploma at the Registrar's Office							
Authorized Signature:							
Signature:			Da	te:			

There is a \$15.00 charge for each duplicate diploma order. Before submitting this form to the Registrar's Office, please make your payment at the Student Accounts & Cashier Services, or send this form along with your check or money order payable to Cal Poly Pomona to:

Registrar's Office

California State Polytechnic University, Pomona

3801 West Temple Avenue

Pomona, CA 91768

The Registrar's Office orders diplomas on a weekly basis. Depending on when your request for duplicate diploma is received, it may take up to three (3) weeks to process your request.