



DIPLOMA RE-ISSUE APPLICATION

OFFICE OF RECORDS &
REGISTRATION (MC 018)

This diploma re-issue form is only valid for the following information:

Name on diploma: _____

UIN or SSN*: _____ or DOB**: _____

Graduation Date: _____ Degree: _____

Would like to pick up diploma; we will contact you when the diploma comes in.

Authentication or Apostille requested for Diploma for International Purposes.

PLEASE NOTE: Your diploma order will be completed within one to two weeks of receipt of your order. It will be mailed to you directly to the address indicated below unless you indicate that you would like to pick up your diploma above.

ADDRESS:

Street _____

City _____ State _____ Zip _____

E-Mail Address _____ Phone (____) _____

Number of Diplomas _____ x \$25.00 = Amount Enclosed \$ _____

Form of Payment: ___ Check ___ Money Order Check # _____ Make checks payable to University of Illinois at Chicago.

NOTARY REQUIRED

SIGNATURE OF GRADUATE x _____ / / _____
Signature of Graduate *Date*

MAIL THIS FORM AND PAYMENT TO:

**University of Illinois at Chicago
Office of Admissions and Records (M/C 018) Box 5220
Attn: Diploma Processing Officer
Chicago, Illinois 60680-5220**

* If you do not know your University Identification Number (UIN), a Social Security Number (SSN), even though not required, will expedite the processing of your order. The University has a strong commitment to ensuring the privacy and confidentiality of student records and will not disclose any SSN without consent for any purpose except as allowed by law and University policy.

** If you do not know your UIN and do not wish to provide a SSN, please provide your Date of Birth (DOB).