ALUMNI REQUEST FOR REISSUED OR REPLACEMENT DIPLOMA

IMPORTANT: ALL fields below are REQUIRED. The form will be returned if incomplete.

Name while attending:_____ **ID#:** _____ **Campus:** _____

Other possible names: _____

Degree/Major Completed: _____

Approximate dates of attendance: _____ **to**_____ **Date of birth:** _____

Clearly print your name as it will appear on your diploma:

_____

If a name change is requested, attach a valid ID and include the Name Change Request form.

Specify the institution name to print on the diploma (check one):

☐ Alliant International University ☐ California School of Professional Psychology

☐ United States International University ☐ San Francisco Law School

See Alliant International University's Diploma Policy (https://www.alliant.edu/academics/registrar-public/) for detailed information about the diploma that you are eligible to order depending on when and from which institution your degree was awarded/conferred.

Please provide the following information for diploma delivery:

Address: _____

_____

_____

Phone number: _____ **Email:** _____

Select a diploma type:

☐ $10 REISSUED. I am returning the original diploma. *I understand that the reissue date will appear on the bottom of the diploma.*

☐ $55 REPLACEMENT. I have already received a diploma and will NOT return the original diploma. *I understand that a clause stating that the diploma is a replacement, along with the date, will appear on the bottom of the diploma.*

Select a processing and shipping option:

☐ Silver: No additional charge. Timeframe of 5-7 weeks.

☐ Gold: $30 fee. Timeframe of 3-4 weeks.

☐ Platinum: $80 fee. Timeframe of 5-7 business days.

Note: International requests may take additional time.

Mail form and payment to:
Alliant International University
Attn: Registrar's Office
10455 Pomerado Road
San Diego, CA 92131

Total amount enclosed: $_____ **Check #:** _____

_____ _____

Student signature **Date**

For Registrar's Office use only:

Received by: _____ **Date:** _____

Processed by: _____ **Date:** _____

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