



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER.

Office of the Registrar

Diploma Re-Order Form

1. While the original date of graduation will be shown, the graduate must agree to accept the current diploma format concerning facsimile signatures, i.e., president, dean, etc.
2. The graduate must pay the appropriate diploma reprint fee of \$35.00. Make check or money order payable to TTUHSC.
3. Mail the completed form and reprint fee to the below address:

TTUHSC Office of the Registrar
 3601 4th Street, MS 8310
 Lubbock, Texas 79430-8310

4. We do not ship to Lubbock addresses, if you live in Lubbock you will be notified when your diploma is ready for pickup at our office. If you have a PO Box, please provide the physical address.

Please print or type

SEND DIPLOMA TO: Name _____

Address _____

City _____ State _____ Zip _____

Home/Cell Phone Number _____

E-mail Address _____

Name as it should appear on diploma: _____

Date of Graduation: _____

Degree Earned: _____

Date of Birth: _____

Last 4 of Social Security Number: _____

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature _____ Date _____

If you have any questions, please e-mail registrar@ttuhsc.edu.