

Office of the Registrar Request for a Replacement Diploma

Complete the form in its entirety, we cannot process incomplete requests.

Name:	
(Print nar	ne used on original diploma)
Mailing Address:	
City:	State:Zip Code:
E-Mail Address (Req	uired):
SSN or NJIT ID#:	
Graduation Date:	(Month and Year)
Degree Awarded:	Major
Reason for Replacen	nent Diploma
Signature	Date

The cost for a replacement diploma is \$50. If paying by check please address it to NJIT. Replacement diplomas will be mailed by Parchment to the address above after payment has been processed.

Please submit your request along with your payment to the Office of the Registrar or mail to:

Office of the Registrar Att: Maryann Sawka New Jersey Institute of Technology University Heights Newark, NJ 07102

Please contact Ms. Sawka, sawka@njit.edu with any questions.