SAN FRANCISCO STATE UNIVERSITY

Last Name | First Name | Middle Initial | Student ID Number

BACCALAUREATE REPLACEMENT DIPLOMA REQUEST

Please fill out this form completely. Make your check or money order payable to San Francisco State University.

Mail to: Registrar's Office
San Francisco State University
1600 Holloway Avenue
San Francisco, CA 94132-4006

Contact us at: (415) 338-2350
records@sfsu.edu

- Diploma orders are filled on the second Friday of each month (excluding holidays). Please allow up to 6 weeks for delivery.
- Express diploma orders are available for an additional charge, (see prices below) and are ordered every Friday (excluding holidays). Please allow 5 business days for delivery after the order is sent to our printer. **No P.O. Boxes on Express Orders.**
- Signatures on replacement diplomas do not necessarily match those on the original diploma.
- Diplomas damaged in the mail are not the responsibility of the University.
- University financial obligations must be paid before your diploma can be issued.
  Please contact the Bursar's Office if you have a financial hold by calling 415.338-1281 or by email at bursar@sfsu.edu.

Type of Diploma	Quantity	Unit Price	Amount
Diploma sent to U.S. & Canada via Regular Mail		$31.00	$0.00
Diploma sent to U.S. & Canada via Express Mail		$65.00	$0.00
Diploma sent to International Addresses via Regular Mail		$40.00	$0.00
Diploma sent to International Address via Express Mail Shipping		$125.00	$0.00
		Total	**$0.00**

Is this a reissued diploma with a Name Change? ☐ Yes ☐ No

PLEASE PRINT OR TYPE YOUR NAME AS IT APPEARS ON UNIVERSITY RECORDS:

First Middle Last

PLEASE PRINT OR TYPE NAME AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA:

First Middle Last

SFSU ID Number _____ Date of Birth _____ Month/Year Graduation _____

Degree Earned (BA/BS) _____ Major _____

Please send the diploma to the following address:

Address _____ Phone Number _____

City _____ State ____ Zip Code _____ Country _____

Province _____ Email _____

AFFIDAVIT: I hereby certify that the information provided is true and correct.

Signature:_____ Date: _____

To be completed by Registrar's Office:

Verified	Fee Enclosed	Diploma Ordered

Reset Form

Print Form