

Louisiana State University Shreveport

Admissions and Records Office

One University Place

Shreveport, LA 71115-2301

Phone: (318) 797-5242

Fax: (318) 797-5286

Duplicate Diploma Order Form

\$25.00 per diploma

Last First Middle

Mailing address

City State Zip Code Daytime Phone Number (Include Area Code)

Student I.D. Number or Social Security Number Major

College	Degree
Arts and Sciences	Bachelors
Business, Education, & Human Development	Masters
	Doctorate

Month and Year of Graduation: _____
(date will be verified before ordering)

Name to Appear on Diploma: _____
(please print clearly)

I am requesting _____ copy(s) of my diploma to be ordered and (check only one):

Mailed to the address listed above

Picked up from the Admissions and Records Office

Student's Signature to ordering and release of duplicate diploma Date

Once order is placed, please allow 4-6 weeks for delivery.

For Office Use Only:

Date Received: _____ Received By: _____ Number of Diplomas Ordered: _____

Receipt Number: _____ Amount Paid \$: _____