BINGHAMTON UNIVERSITY
STATE UNIVERSITY OF NEW YORK

Office of the Registrar
Admissions Center, Room 181
PO Box 6000 Binghamton, New York 13902-6000

Phone: 607-777-6088 Fax: 607-777-6515
Email: registrar@binghamton.edu
www.registrar.binghamton.edu

REPLACEMENT DIPLOMA REQUEST FORM

- **Complete this form and mail with $15 fee payable by check or money order to:**
  - Binghamton University, Office of the Registrar,
    - 4400 Vestal Parkway East, Binghamton, NY 13902 (If mailing by private carrier)
    - PO Box 6000, Binghamton, NY 13902 (If mailing by USPS)
  - Cash and/or credit cards not accepted.
- Allow 3-4 weeks for processing.
- Diploma is mailed via first-class US Mail, no tracking available.
- Please email degree@binghamton.edu with any questions.

STUDENT INFORMATION (Please print clearly)

Last Name_____ First Name_____ MI _____

Maiden/Former (if applicable) _____

B-Number:* _____

**B-number assigned to students enrolled beginning August 2008.*

OR

Last 4 digits of SSN: _____ **AND** Date of Birth: _____

Email:_____ Daytime Phone: _____

Diploma Degree to be replaced: Bachelors ___ Masters ___ Doctoral ___ Certificate ___

Address where diploma should be mailed via **first-class US Mail**:

Street _____

City _____ State/Province _____

Country:_____ Zip/Postal Code _____

Signature_____ **Date** _____