



DELAWARE VALLEY
UNIVERSITY

Request for Replacement Diploma

**SUBMIT TO OFFICE OF THE BURSAR (FAX 215.230.2972)
REPLACEMENT DIPLOMA FEE: \$50.00**

NAME AS IT APPEARS ON DIPLOMA: _____

DEGREE, MAJOR: _____

DATE OF GRADUATION: _____

CONTACT PHONE NUMBER: _____

MAILING ADDRESS: _____

SIGNATURE OF GRADUATE: _____

DATE: _____

**PERSONAL CHECKS, MONEY ORDERS, MAJOR DEBIT / CREDIT CARDS, AND CASH ARE ACCEPTED.
TO PAY BY DEBIT / CREDIT CARD, PAY IN PERSON OR CALL THE OFFICE OF THE BURSAR AT 215.489.2376 AND
SELECT OPTION 4.
DO NOT MAIL CASH. DO NOT FAX OR MAIL DEBIT / CREDIT CARD INFORMATION.**