

# TRINE UNIVERSITY DUPLICATE DIPLOMA REQUEST FORM

Date of Request: \_\_\_\_\_

Copies Requested: \_\_\_\_\_

<b>Social Security Number</b>	<b>Phone</b> (    )	<b>Trine ID#</b>	<b>Date of Birth:</b>
<b>Student Name</b> Last: _____ First: _____ MI: _____ Former Name: _____			
Current Address: _____			
City, State, Zip _____			
Major Field of Study: _____		Degree Awarded: _____	
Dates of Attendance: From: _____ To: _____			
<b>Student Signature is required:</b>			

<b>Please print complete mailing address of where the duplicate diploma is being sent.</b> <b>Please contact the Registrar's Office at 260.665.4239 for diplomas mailed outside the United States.</b>
To: _____
Street Address: _____
City, State, Zip: _____

## Payment

There is a \$25.00 charge per duplicate diploma. Please contact the Registrar's Office at 260.665.4239 for diplomas mailed outside the United States.

\_\_\_\_ Check/Money Order - *Please make payable to Trine University*

\_\_\_\_ Credit Card – *Please make credit card payment online at <https://myportal.trine.edu/ics> and select Pay Online.*

*For online payment validation please list the name on the credit card and payment date below.*

Name on Credit Card \_\_\_\_\_ Payment Date \_\_\_\_\_

\_\_\_\_ I am a Tri-State University alum and wish to receive my one free complimentary Trine University diploma.

**Please email your request to: [shankl@trine.edu](mailto:shankl@trine.edu)**

If email is not an option, please print and send this form to the address below.

Trine University  
Office of the Registrar  
1 University Avenue  
Angola, IN 46703-1764

**260.820.4154 Fax**

**Questions**

**260.665.4239**