



**TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER**

Office of Student Services, Registrar  
& Financial Aid

Office of Student Services  
3601 4th Street, MS 8310  
Lubbock, Texas 79430

**Diploma Re-Order Form**

1. While the original date of graduation will be shown, the graduate must agree to accept the current diploma format concerning facsimile signatures, i.e., president, dean, etc.
2. The graduate must pay the appropriate diploma reprint fee of \$35.00. Make check or money order payable to TTUHSC.

**Please print or type**

SEND DIPLOMA TO: Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home/Cell Phone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Name as it should appear on diploma \_\_\_\_\_

Date of Graduation \_\_\_\_\_

Degree Earned \_\_\_\_\_

I hereby certify that the above information is true and correct to the best of my knowledge.

*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

*If you have any questions, please e-mail [student.services@ttuhsc.edu](mailto:student.services@ttuhsc.edu).*