



University Registrar Use

Date Received: _____

Date Processed: _____

Diploma Request

All graduates will receive one copy of their diploma upon graduation. Additional copies must be requested using the form below. Completed forms must first be sent to the **Student Business Services Office (SBS)** in the Wellness Center, room 1103 for payment processing. There is a **required fee of \$10 USD (per diploma)** that is due upon receipt of request. Diploma requests will not be processed or released until the diploma fee has been received, all balances on the student's ledger have been cleared, and transcript/diploma holds have been cleared.

Please allow up to five (5) business days for processing.

DIPLOMA REQUEST SUBMISSION & PAYMENT OPTIONS

1. **In-Person:** Submit request and payment to SBS in-person at the Wellness Center, room 1103.
2. **Via Mail:** Mail in request with payment via check or money order payable to: **Florida Polytechnic University**
Mail to: Florida Polytechnic University, Student Business Services, 4700 Research Way, RM 1103, Lakeland, FL 33805
3. **Via Email:** Send request via email to SBS at: sbs@floridapoly.edu; once your request is received, they will bill your account, and then you may pay the required fee through your CAMS account. After payment is received SBS will notify the Registrar's Office so the transcript can be processed.

Last: _____ First: _____ MI: _____

Student ID: _____ Email: _____@floridapoly.edu

Maiden/other names used: _____ Date of Birth: _____

Phone: _____ (Home or Cell) Non-Florida Poly Email: _____

Are you requesting any changes (i.e. name change) to your original diploma? ☐ Yes ☐ No

If yes, please detail your requested adjustment: _____

Step 1: Diploma Delivery Acknowledgement-

Florida Polytechnic University has teamed up with Parchment to offer an official digital version of a student's diploma and to facilitate the mailing of a print diploma to the student's home address listed below. Your printed diploma will be shipped to you in 4 to 6 weeks after your diploma has been issued.

Recipient Name: _____ Attention/Department: _____

Address: _____ City: _____ State: _____ Zip: _____

Step 3: Student Certification

I certify that I am the student named above and authorize the release of my diploma to the recipient indicated on this form. I understand that I must pay the diploma fee before my diploma can be released. Furthermore, I understand that I am responsible for verifying that the diploma was received by the recipient listed above.

Student Signature: _____ Date: _____

STUDENT BUSINESS SERVICES USE

Date Diploma Fee Paid: _____ Receipt Ref#: _____ Fee Received By: _____

Complete as applicable: ☐ Student Ledger Paid ☐ Hold Removed Effective Date: _____