

FedEx DIPLOMA DELIVERY REQUEST

DIRECTIONS—Complete this form if you wish to have your original diploma delivered by FedEx. If this form is not completed, your diploma will be mailed by USPS first-class mail to U.S. addresses and by USPS airmail to international addresses. If you will be working or continuing your studies abroad and this diploma will require an Apostille, please contact the Office of the Registrar at 612-626-4432.

Deadline to submit the form—This form must be received by your graduation date. If your form is received after your graduation date, the form and payment will be returned to you. You can expect your diploma to be sent within 2-3 weeks of your degree being awarded. Tracking information will be sent to the email address on the form.

Do not use this form to order a duplicate/replacement diploma. The Duplicate Diploma Request form can be found on the One Stop website Forms page.

RETURN FORM

Mail to:

Diplomas - Office of the Registrar
200 Fraser Hall, 106 Pleasant St SE
Minneapolis, MN 55455

In-person:

200 Fraser Hall

By fax (if paying by credit card):

612-625-4351

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

SECTION 1. Student information			
First	Middle	Last	
Daytime phone number	Email address	Date of birth	University ID or SSN
Student signature (required)			Date
SECTION 2. Diploma mailing information			
Diploma mailing address (line 1; no P.O. Boxes)		Recipient name	
Diploma mailing address (line 2)			
City	State	ZIP code	Country
Recipient's daytime phone number (required for Priority Overnight)		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
PART A. Diploma #1			
College	Degree		Graduation date
PART B. Diploma #2 (If earning more than one degree or certificate this term)			
College	Degree		Graduation date
SECTION 3. Order summary			
Delivery method		Cost	Total
Priority Overnight (Next-business-day delivery by 3 p.m. to most U.S. addresses; recipient phone number is required and this method cannot be made to P.O. boxes.) <input type="checkbox"/>		\$15 delivery fee for each address	
		Total amount due:	
SECTION 4. Payment information			
Requests will not be processed without payment. Send check or money order payable to the University of Minnesota, or provide credit card information (Visa, MasterCard, Discover, Diner's Club, AmEx) with card number and expiration date. <i>NOTE: Overpayments of \$5.00 or less will not be refunded.</i>			
Check one method of payment <input checked="" type="checkbox"/> Cash (in-person orders only) <input checked="" type="checkbox"/> Check or money order payable to the University of Minnesota <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Diner's Club <input type="checkbox"/> Discover Card <input type="checkbox"/> AmEx		Amount enclosed \$ _____ \$ _____ \$ _____	
Account #: _____ / _____ / _____ / _____		Expiration date: _____ / _____	

To request copies of this form in an alternative format, call Disability Resource Center at 612-626-1333. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.

