



MISSISSIPPI STATE UNIVERSITY™

Replacement/Duplicate Diploma Request

***Please note:** All signatures for university officials appearing on original diplomas from 1993 to present will be used on the replacement diplomas. Prior to 1993, signatures of such officials may not be available. In such cases, signatures of current officials will be used.*

Name _____ Date _____
Last First Middle Maiden

Name as printed on original diploma* _____

*Students desiring a different name on diploma will be required to change the name on their official student record.

Doing so requires presenting copies of the official name change (driver's license, marriage license, etc.)

ID #: _____ Date of Birth: _____ Date of Degree: _____

College: _____

Degree: _____

Major: _____ Concentration _____

Address: Street Name: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

*This form and a check to Mississippi State University for the amount of \$50.00 should be sent to:

Mississippi State University

Office of the Registrar

Attn: Shiera Bilbo

P.O. Box 5268

Mississippi State, MS 39762.

Please allow a week for processing.

For questions, please call Shiera Bilbo, 662-325-8204 or email sbilbo@registrar.msstate.edu