



New York City Campus
Registrar
Nyack College
2 Washington Street
New York, NY 10004
(646) 378-6192
Servicecenter@nyack.edu

Diploma Re-Order Request

Complete this form and return it to the Registrar's Office or servicecenter@nyack.edu

Last Name: _____ First Name: _____ DOB: _____

(as it appeared when you were a student)

Student ID#: _____

Degree Earned (circle one): AA AS BA BS BMU SMB MA BS/MS MS MAT MSED MSW MPS MDIV DMIN

Major: _____ Concentration (if applicable): _____

Graduation Date: _____

I would like my name to appear on my diploma as (PRINT CLEARLY):

FIRST

MIDDLE

LAST

Please mail my diploma to the below address:

Street Address: _____

Apt/Suite/Floor: _____

City: _____

State/Province/County: _____

Zip/Postal Code: _____

Country (if outside of the USA)**: _____

**Student is responsible to pay any additional amount it will cost to mail the diploma if outside of the continental United States and/or if the charges exceed \$10 in postal fees.

Explanation for re-order request: _____

A \$45 fee will be applied to your student account upon receipt of this request. Payments must be received prior to the release of your diploma. Mail a \$45 check or money order written out to "Nyack College | ATS" with this request, or pay online at www.nyack.edu/payments.

Student's Signature

Date