



Western New Mexico University
Office of the Registrar
P.O. Box 680
Silver City, New Mexico 88062

Duplicate Diploma/Cover Order Form

Duplicate Diploma Request _____ or _____ Diploma Cover Request _____

Name: _____
(Print your name exactly as you wish it to appear on your diploma)

ID Number: _____

Mailing Address

Street Address: _____

City, State, Zip: _____

Day Phone: _____

Degree: _____

Major: _____

Date Awarded: _____

Mail this request with the fee of \$10.00 check or money order to the above address.

E-mail _____

Signature: _____ Date: _____

***** OFFICE USE *****

Date Paid \$10.00: _____

Verified by: _____

Printed Date: _____

Mailed Date: _____

Tracking # _____