

GLENVILLE REQUEST FOR REPLACEMENT DIPLOMA (RO-08/23)

Registrar's Office • 200 High Street • Glenville, WV 26351 • 304-462-4117 • FAX 304-462-8619 • Registrar@glenville.edu

Student Name:		GSU ID# or last 4 of SSN:	
-			
Previous Names (if applicable):			
Mailing Address:			
	Phone:		
☐ I understand that if my graduation State College. ☐ I graduated prior to May 2022 and			
I am requesting a replacement diploma			
for each diploma. Graduation month/y	ear		·
☐ Bachelor of Arts (BA)	☐ Bachelor of A	Arts Education (BAED)	☐ Bachelor of Science (BS)
☐ BS Business Administration (BSBA)	☐ Regents Back	nelor of Arts (RBA)	☐ Associate of Arts (AA)
☐ Associate of Science (AS)	☐ Master's Deg	ree	
Make checks payable to Glenville State University. Credit/Debit cards are accepted by including the information below or contacting 304-462-6120 once the official request has been received. We accept MasterCard, Discover, and Visa. You must have all financial/academic obligations satisfied with GSU or your request will not be processed Unfulfilled requests due to unmet obligations are destroyed after 30 calendar days.		Regular Processing - \$35.00 each	
		X number of diplomas being ordered	
		\$total a	mount
Credit/Debit Card Number		Exp. Date	3 Digit Security Code
Signature		Date	