

CALIFORNIA WESTERN SCHOOL OF LAW

Registrar's Office

REPLACEMENT DIPLOMA REQUEST

Current Name: _____

Phone: _____ Email: _____

Name to be printed on diploma: _____

*Must be the same name under which you attended or official documentation supporting a name change must be included (marriage/divorce certificate, court documents for legal name change, etc.)

Last 4 SSN: _____ Degree Awarded: _____

Juris Doctor or LLM

Date Degree Awarded: _____
Month/Day/Year

I prefer to pick up the diploma. Mail the diploma to the following address:

Name

Street Address

City

State

Zip

Signature of Student: (For security reasons, all requests must be signed by the graduate)

Signature

Date

Please enclose a check for \$25 payable to California Western School of Law and mail it with the completed form to: Office of the Registrar, 225 Cedar Street, San Diego, CA 92101. Additional fees will apply for expedited orders and international shipping. Diplomas cannot be delivered to a PO Box. Please allow 4 to 6 weeks for delivery.

For more information, contact the Registrar's Office at (619) 525-1414 or email: registrar@cwsl.edu

Office Use Only:

Amount Paid: _____

Received By: _____

Processed By: _____

Date: _____