

Certificate Replacement Request

PLEASE TYPE OR PRINT CLEARLY

Failure to complete any of the fields below may delay or preven delayed due to a hold on your student record, lack of academic to request replacement copies only. If you have not received you	For Office Use Only Payment received by Date Certificate produced by				
STUDENT I.D. NUMBER (IF KNOWN)			Date		
LAST NAME FIRS	NAME FIRST NAME INITIAL			Questions? Call Student Services Phone ► (858) 534-3400 Number	
STREET ADDRESS					
			•	placement requests	
CITY	STATE ZIP		must be submitted in writing To best protect your information, credit card		
PHONE NUMBER O	OTHER NAMES UNDER WHICH YOU HAVE E	NROLLED	information should never be emailed . It may be faxed or mailed to our office, or submitted in person.		
EMAIL ADDRESS			Mail to ► Student Services University of California San Diego Extended Studies		
STUDENT SIGNATURE physical signature required for release	of records		9500 G	ilman Drive, Dept. 0172-S	
Mail Certificates to				a, CA 92093-0172	
Certificates cannot be mailed without the complete address	i.		Fax to ► Fax N	lumber: (858) 246-1031	
ADDRESS			Check one delivery Standard (no addition	USPS mail delivery	
	Total Copies			No additional fee. You will be hen certificate is ready for pick up	
Professional/Specialized Certificate: \$25 per copy	Total Copies Requested \$25 per cop	5	Specifiy local	tion	
Name of certificate program Continuing Education Unit (CEU) Certificate:\$10 per copy	Total CEU \$10 per cop	y \$	FedEx (\$2	25 additional fee per address. eceived by 2pm PST. No delivery	
Name of course	Total FedEx Requests FedEx Fees	\$			
*If applicable, student is responsible for any customs for additional certificates, include a supplemental pag		TAL \$			
Payment method (Check one) ☐ Cash/Check ☐ Visa ☐ Mastercard ☐ D (payable to UC Regents)	iscover American Express	☐Diners Club			
CREDIT CARD NUMBER		EXP. DATE			
AUTHORIZING SIGNATURE physical signature required					