



**PACIFIC SCHOOL OF RELIGION**

1798 SCENIC AVENUE  
BERKELEY, CA 94709-9989  
TEL: 510/849-8252  
FAX: (510)845-8948 ATTN: REGISTRAR  
ALSO AVAILABLE ONLINE [WWW.PSR.EDU](http://WWW.PSR.EDU)

## PSR Diploma Replacement Request

To request a diploma replacement from PSR, you must do so in writing. Submit this form with a payment of \$25.00 per copy (if requesting a duplicate replacement diploma) as check, cash, or credit card to:

Pacific School of Religion, attn: Registrar  
1798 Scenic Avenue  
Berkeley, CA 94709  
OR fax to (510) 845-8948 attn: Registrar  
OR email the completed form to registrar@psr.edu.

Please note that it takes approximately 4-6 weeks working days from the date the request is received to process transcript requests. All diplomas are sent via USPS certified mail unless otherwise noted.

**Rush diplomas are not available.** If you are in urgent need of verification of your degree, please request a letter from the registrar verifying your degree instead. A verification letter can be faxed or emailed same day and does not have a fee. If you wish for a letter of verification to be overnighted via USPS, UPS, or FedEx, you will need to pay an extra fee.

Date: \_\_\_\_\_

I, (name): \_\_\_\_\_, residing at:

\_\_\_\_\_  
(street address, with PSR box # if applicable)

\_\_\_\_\_  
(city/state/zip)

am requesting \_\_\_\_\_ copies of my PSR diploma to be sent to the address(es) listed on the back.

- The last 4 digits of my Social Security number are: \_\_\_\_\_
- My date of birth is: \_\_\_\_\_
- The name I used while I was at PSR is: \_\_\_\_\_
- I would like the name on the diploma to appear exactly as: (print clearly)  
\_\_\_\_\_

- If this diploma name is different from the name I used while I was at PSR, I have also enclosed a copy of the official documentation of my name change (i.e., marriage certificate, name change certificate, etc.)

I am requesting that my diploma for the following certificate and/or degree(s):

- 1) \_\_\_\_\_(cert./deg.) \_\_\_\_\_(semester/yr awarded)  
2) \_\_\_\_\_ (cert./deg.) \_\_\_\_\_(semester/yr awarded).

Please check ONE of the two choices below:

- My signature below verifies that my diploma has been damaged or there is an error on my diploma, and I am returning the damaged/incorrect diploma with this request. No payment is enclosed.
- My signature below verifies that I have either lost my diploma or cannot access my original diploma and would like a duplicate replacement.

Please :

- find my payment of \$\_\_\_\_\_ (cash / check) enclosed OR
- Charge my:
  - VISA \_\_\_\_\_ / Mastercard \_\_\_\_\_
  - Number: \_\_\_\_\_
  - Expiration date \_\_\_\_\_/\_\_\_\_\_
  - Billing address zip code \_\_\_\_\_.

The date on which I would like my diploma to reach its destination(s) is \_\_\_\_\_, but I also understand that regardless of my preferred arrival date, this request will take up to 4-6 weeks to process. I have reported this information to the best of my knowledge, and I understand that any incomplete information, information inconsistent with PSR records, or blocks on my account can result in a delay or failure to process this request. If any problems arise, you may contact me at the following

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Signature: \_\_\_\_\_

**Send diploma(s) to the following address:** *(Please list any additional addresses. Holding your diploma at the Registrar's Office for pick-up is discouraged, but if you strongly prefer that option, please indicate that below along with a preferred pick-up date. Be prepared to show your driver's license or some form of picture ID when picking up your diploma.)*

|                       |
|-----------------------|
| Name: _____           |
| Address: _____        |
| City/State/Zip: _____ |
| Country: _____        |