OFFICIAL REPLACEMENT DIPLOMA REQUEST
EAST CENTRAL UNIVERSITY RECORDS OFFICE
1100 E 14th PMB J-8 ADA, OK 74820-6999
FAX: 580-559-5432

Name ___________________________________ Date ________________

Last     First     Middle     Former

ID or SSN ____________________________

Reason for Request
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Name to be shown on diploma __________________________________________

Date of Graduation ________________________________

Mail to __________________________________________

______________________________________________________________________
______________________________________________________________________

Email Address ____________________________ Phone Number ____________________________

*Signature of Person Making Request

Must Include:
• Copy of a Photo ID,
• Original Diploma, and
• Payment of $25 made payable to ECU.
  A credit card payment may be made by phone @ 580-559-5227.

Order Taken By __________ ID ________
HOLDS __________
LOG IN __________ DONE __________

Revised 03/15