



University of California, Davis
Office of the University Registrar

Diploma Mailing Form

One Shields Avenue, Davis, CA 95616-8692 / Information: (530) 752-3639 / Fax: (530) 752-6906

Complete this form and return it, with fee, to the Cashier's Office, in 1200 Dutton Hall, or by mail to the Cashier's Office, University of California Davis, PO Box 989062, West Sacramento, CA 95798-9062. Make fee payable to UC Regents. Diplomas will be available four months after the end of the term. Notify the Office of the University Registrar of any changes to your address. If there are any outstanding balances on your account, your diploma will be held until your bill is paid. Contact Student Accounting at (530) 752-3646 for more information about your hold. *If it has been over three years since you graduated, please contact the Office of the University Registrar's office before submitting this form.*

Diploma mailing fees:

Undergraduate/Graduate Diplomas

Domestic mail \$5.50
International mail \$14.00

Professional (Law, Medicine, Veterinary Medicine) Diplomas

Domestic mail \$9.00
International mail \$14.50

Personal Information

Student ID Number _____ E-mail Address _____

Name _____

Mailing Address _____

City/State/Zip _____ Phone _____

Degree Information

<input type="checkbox"/> A.B.	<input type="checkbox"/> M.A.	Graduation date:	<input type="checkbox"/> Spring (June)	<input type="checkbox"/> Spring Semester (May)
<input type="checkbox"/> B.S.	<input type="checkbox"/> M.S.		<input type="checkbox"/> Fall (December)	<input type="checkbox"/> Summer (September)
<input type="checkbox"/> B.A.S.	<input type="checkbox"/> Ph.D.		<input type="checkbox"/> Winter (March)	Year _____
<input type="checkbox"/> Other				

I certify that I am the above named person and the information I have provided is accurate.

Signature _____ Date _____

Payment Information (for mail orders, only; no faxed, e-mail, and e-mail attachment orders accepted)

Paid by: Check Money order
 MasterCard Visa Discover Credit card number _____ Expiration Date _____

Name on credit card _____

Signature _____

Office Use Only

Keyed by _____ Date _____

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