

Request for Replacement of the Degree Certificate

Complete and submit this form together with the <u>non-refundable</u> replacement fee receipt to the Student Services Hub located at Basement 1, the Concourse, under Li Ka Shing Library (opposite Dental@Uni) during the following hours: Monday to Friday, 10:00am to 5:00pm (closed from 1pm to 2.30pm).

Payment can be made at the Student Services.

Amount Received:

Date Received:

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	ice or the reg	iodai ao not man degree esta	medic office replacement is	ready for com	cccom
Name: (as in you	ır degree certi	ificate or official transcript)			
Student Identificatio NRIC/FIN Number (s printed on student matric card alphabet):) OR		
Date of Birth (<i>DD/M</i>	<i>IM/YYYY</i>):				
Address:					
	<u>-</u> -				
	-				
Programme Type: (tick ☑)	 □ Undergr	Prgraduate □ Graduate □ Confe		Degree was	(DD/MM/YYYY)
(UCK <u>II</u>)	(use separa	ate form for each type)	Come	neu.	(וויון איוויין עט
School Attended: (tick ☑)	□ Lee Kong□ School of□ School of	f Accountancy g Chian School of Business f Economics f Information Systems f Social Sciences f Law	Amount Enclosed:		rrect amount to avoid ot mail cash)
Degree Name:	-			-	
Reason for requestir replacement:	ng -			-	
Supporting Documer attached:	nt -	(please specify)		-	
		(4			
Contact No(s):	(in case we e	ncounter problems processing y	rour order)		
Special Instructions:		, , ,	•		
If you are authorisi completed and signe to registrar@smu.ee authentication, the them at 6828 0123 NRIC/FIN/Passport	ng a proxy to ed Authorisati du.sg at leas email must be if you need to as proof of i	o collect the additional copy of on Form (can be downloaded a t 3 days before the proxy co e sent from your SMU email. For e reset your password. The pro dentity when collecting the do oxy if the graduate does not em	t https://alumni.smu.edu.s mes to our office to coll Please contact IT Help Cen xy must present the compl ocuments. SMU reserves	sg/services/re ect the docu tre at helpde leted form (d the right no	placement-certificates) Iment. As a form of sk@smu.edu.sg or call uly signed) and his/her
Signature					Date
Office Use Only					

Receipt No: _

Date Processed: