



DEGREE/DIPLOMA APPLICATION

NSU ID: N			l of Payment	
Name:		☐Check or money	One-Stop Shop)	
Daytime Phone Numb	per:	□Visa □Master C		
Alternate Phone Num	ber:	Account Number		
Degree:		Expiration Date	Amount	
Major: 1				
2		Check/Money Order Number		
Minor: 1		Signature (required)	Date	
2.		Each degree application is as program of study:	ssessed a fee based upon the	
Concentration:			☐ Health Profession Division Students: Please visit	
1.		www.nova.edu/registrar/ins	structions_hpd.html for	
		☐ Shonard Board Law Contor: No charge		
2		All other NSU degree pr	_	
Please TYPE or	PRINT your name* in the space belonger	ow EXACTLY as you want it to a	ppear on your diploma	
FIRST	MIC	DDLE	LAST	
	change, please submit legal document	_		
of naturalization, perman nsuregistrar@nova.edu o	ent resident card, passport, court orde	r, or uniformed service military ID) via e-mail to	
	dress where the diploma is to be	sent)**		
		,		
Street Line 1			· · · · · · · · · · · · · · · · · · ·	
Street Line 2				
 Citv	State/Province	Zip/Postal Code	Country	

**If you change your diploma address after completing this application, you must update it in WebSTAR *and* send a change of address email to *diplomas@nova.edu*. Not providing these changes of address will cause a delay in receiving your diploma and may

DA, REV. 4/2012

result in an additional fee.