



# CUNY SCHOOL OF LABOR AND URBAN STUDIES

THE CITY UNIVERSITY OF NEW YORK

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## PICKUP DIPLOMA

### REQUIRED INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

EMPLID Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Degree (check all that apply)      **Bachelor**      **Certificate**      **Master**

Dates of attendance from [Semester] \_\_\_\_\_ [Year] \_\_\_\_\_ TO

[Semester] \_\_\_\_\_ [Year] \_\_\_\_\_

#### Check Option

##### **PICK-UP**

You must provide *Photo ID* to retrieve diploma. We will contact you when the Diploma is ready to be picked-up.

##### **USPS**

The College is not responsible if the diploma is lost, stolen, or damaged in the mail. If you do not receive your diploma or arrives damaged, you will be responsible for ordering a replacement copy and pay the \$30 fee.

### MAILING ADDRESS FOR ORIGINAL DIPLOMA

Name/Attention: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

**Drop-Off/Mail completed request to:**  
CUNY School of Labor and Urban Studies  
Attn: Office of the Registrar  
25 W 43rd Street, 19th FL  
New York, NY 10036

**OR**

**E-mail**  
[Registrar@slu.cuny.edu](mailto:Registrar@slu.cuny.edu)