



Office of the National Registrar

APPLICATION FOR REPLACEMENT DIPLOMA/ORDINATION DOCUMENT

PRINT YOUR NAME EXACTLY AS IT APPEARS ON YOUR DIPLOMA OR ORDINATION DOCUMENT.

*Please be advised that your replacement diploma will contain the EXACT name under which you attended HUC-JIR and will include signatures of the current administration. A reprinted Smicha will not include faculty signatures. If you are a current student and you have a change of name, please fill out a Change of Name form before requesting a replacement.

First	Middle Name or Initial	Last
Address		
City	State	Zip
Email		
Home Telephone ()	Cellular Telephone ()	Student's Gender Identification: <input type="checkbox"/> Male <input type="checkbox"/> Female
<p align="center">Cincinnati</p> <input type="checkbox"/> Doctor of Philosophy <input type="checkbox"/> Hebraic and Cognate Studies, M Phil <input type="checkbox"/> Hebrew Letters, MAHL <input type="checkbox"/> Rabbinical Ordination <input type="checkbox"/> Master of Arts, MA <input type="checkbox"/> Doctor of Hebrew Letters <p align="center">National</p> <input type="checkbox"/> Executive MARE <input type="checkbox"/> Cert in Jewish Education	<p align="center">Los Angeles</p> <input type="checkbox"/> DeLeT, Certificate in Day School Teaching <input type="checkbox"/> Doctor of Hebrew Letters <input type="checkbox"/> Doctor of Hebrew Studies <input type="checkbox"/> Hebrew Letters, MAHL <input type="checkbox"/> Jewish Education, MA <input type="checkbox"/> Jewish Nonprofit Management, Cert <input type="checkbox"/> Jewish Nonprofit Management, MA <input type="checkbox"/> Judaic Studies, MA <input type="checkbox"/> Rabbinical Ordination <input type="checkbox"/> Org. Leadership Innovation, MSOLI	<p align="center">New York</p> <input type="checkbox"/> Cantorial Ordination <input type="checkbox"/> Doctor of Ministry <input type="checkbox"/> Hebrew Literature, MAHL <input type="checkbox"/> Rabbinical Ordination <input type="checkbox"/> Religious Education, MARE <input type="checkbox"/> Sacred Music, MSM <input type="checkbox"/> Cantorial Certificate

Date of Graduation/Ordination: _____

For Rabbinical or Cantorial Ordination Diploma **ONLY** Please type in Hebrew.

Student's Full Hebrew Name (e.g., Ploni(t) ben/bat Ploni v'Plonit) *	
*If a parent is a Rabbi or a Cantor, please include the honorific "Harav" or HeChazan" before that name (e.g., Ploni(t) ben/bat HeCHazan Ploni v'Plonit)	
Student Signature	Date

There is a \$100 diploma replacement fee.
PLEASE SEND THIS FORM ALONG WITH A CHECK OR MONEY ORDER TO:

Office of the National Registrar
3101 Clifton Avenue
Cincinnati, Ohio 45220