



Office of the Registrar
APPLICATION FOR REPLACEMENT DIPLOMA/ORDINATION DOCUMENT

PRINT YOUR NAME EXACTLY AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA.

\*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: \_\_\_\_\_
Cell Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_
Email: \_\_\_\_\_

Cincinnati

- o Doctor of Philosophy, PhD
o Hebraic and Cognate Studies, M. Phil
o Hebrew Letters, MAHL
o Rabbinical Ordination, ORD
o Master of Arts, MA, MAJS
o Doctor of Hebrew Letters, DHL

National

- o Executive Masters in Religious Education, EXMA
o Certificate in Jewish Education, CJE

Los Angeles

- o Certificate in Day School Teaching, DeLeT
o Certificate in Jewish Organizational Leadership, CJOL
o Doctor of Hebrew letters, DHL
o Doctor of Hebrew Studies, DHS
o Educational Leadership, MEEdL
o Hebrew Letters, MAHL
o Jewish Education, MA
o Jewish Learning, MA
o Jewish Nonprofit Management, Certificate
o Jewish Nonprofit Management, MA, MAJNM

- o Judaic Studies, MA
o MA Arts in Teaching, MAT
o Rabbinical Ordination, ORD
o Organizational Leadership Innovation, MSOLI

New York

- o Cantorial Ordination, CORD
o Doctor of Ministry, DMIN
o Hebrew Literature, MAHLIT
o Rabbinical Ordination, ORD
o Religious Education, MARE
o Sacred Music, MSM
o Master of Arts, MA, MAJS

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 Registrar
3101 Clifton Avenue, Cincinnati, Ohio 45220