**STUDENT AND ACADEMIC SERVICES**

APPLICATION FOR THE ISSUE OF AREPLACEMENT **AWARD CERTIFICATE**

**Guidance for Applicants**

1 The certificate which the University issues as proof of the conferment of an award is a unique and valuable document which should be carefully preserved by its recipient. Under no circumstances will the University issue additional copies or duplicates to any applicant holding an original certificate. Replacements have precisely the same standing as the original which they replace, are produced in the format currently in use and may not be a facsimile/e-mail copy of the original. **The cost of replacement is £50.**

2 The loss or destruction of a certificate is a serious matter and a replacement will only be issued at the discretion of the University. The University reserves the right not to issue a replacement or to specify reasons for its decision.

3 Application for the issue of a replacement certificate should be made to the University’s Certification Team. The applicant **MUST** provide

 (i) EITHER the damaged or defaced certificate

 OR

 an undertaking that should a replacement be issued, and the original is subsequently found, it will be returned to the University (SECTION B).

 (ii) **payment using our online store.** The link has been provided at the end of this document or a cheque for £50 made payable to the ‘University of the West of England, Bristol’Please note that cheques will further delay the process by 10 working days.

 (iii) details of the address to which the replacement should be sent

 (iv) this form, including the payment reference

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION A** (to be completed in BLOCK CAPITALS)

Name of applicant -------------------------------------------------------------------------------------------------

Name of applicant at date of conferment (if different) -----------------------------------------------------

Title of Course --------------------------------------------------------------------------------------------------

Faculty/Campus at which applicant studied ------------------------------------------------------------------

Year of Award ----------- Student Number (if known)---------------------Date of Birth -----------------

E-mail address: ---------------------------------------------------------------------------------------------------

Signature (handwritten)------------------------------------ Date --------------------------------------------

**SECTION B** (To be completed if original certificate has been lost or destroyed)

I hereby undertake that should my original certificate be found, I will return the replacement to the University of the West of England, Bristol.

Signature (handwritten)------------------------------------------- Date -------------------------------------

**SECTION C** (Declaration to be completed if original certificate has been lost or destroyed explaining reasons for, and circumstances of loss or destruction)

I, (full name) ------------------------------------------------------------------------------------------------------

of (full address including postcode and country)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

­­­­­­­­

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(PLEASE NOTE THAT THIS IS ALSO THE ADDRESS YOUR CERTIFICATE WILL BE SENT WHEN REPRODUCED, UNLESS SPECIFIED ELSEWHERE ON THE FORM)

do solemnly and sincerely declare that (reason for application):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The University reserves the right to reject any application form that has been altered from the original in any way.

Signature (handwritten) -------------------------------------------- Date -------------------------------------

**SECTION D - Payment**

Please make the payment for this service using the online store by using [this link](http://store.uwe.ac.uk/browse/product.asp?catid=766&modid=1&compid=1). It is the applicant’s responsibility to provide the reference on completion of the £50 payment. **Without this reference, your application will not proceed.**

UWE Online Payment Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **BY POST:****Please return completed form to:**(note no student access to this office)**BY HAND:****BY E-MAIL:** | Student Information Request Team – Room 5F09University of the West of EnglandStudent and Academic ServicesColdharbour LaneFrenchayBRISTOL BS16 1QYInformation Point (to be forwarded to SIRT)certificates@uwe.ac.uk  |
| **For enquiries please contact:** | Tel No: +44 (0)117 32 85566 or (certificates@uwe.ac.uk)  |