

WESLEYAN UNIVERSITY
“Special Character” Diploma Name Confirmation

Please note the way that my name is spelled below, with special characters or accents. This is the way that I wish to have my name appear on my diploma.

First Name: _____

Middle Name: _____

Last Name: _____

Suffix: _____

Degree Candidate: B.A.

Degree Year: _____

Signature: _____

Contact Phone Number: _____

WesID: _____

Date: _____

Please mail, fax or drop off to:

Office of the Registrar
Wesleyan University
North College
237 High Street
Middletown, CT 06459
FAX: (860) 685-2601