## OFFICE OF THE GRADUATE REGISTRAR BELFER BUILDING - Room 202 Tel: (718) 430-8682 | Fax: (718) 430-8655 gradregistrar@einsteinmed.edu

## PHD DIPLOMA FORM

To:	DOCT	OR OF PHILOSOPH	R OF PHILOSOPHY Degree Recipients		
RE: Printed Name on PhD Diploma					
1.	Clearly PRI	Clearly PRINT your name exactly as it should appear on your PhD diploma. If applicable, include accents.			
	Printed name on the diploma must be your legal name. If your legal name has changed or differs from the nar your graduate school record, a copy of the court order or other legal document showing the legal name change be filed with the Graduate Office (Belfer 202).				
2.	<b>Previous degrees: List previous degrees (undergraduate, graduate) that you have been awarded.</b> List the degree type (B.S., M.A, etc.), the name of the degree-granting institution and the degree conferral/award date. For international institution, include the country name.				
3.	Submit this form to the Graduate Office (Belfer 202 or <a href="mailto:gradregistrar@einsteinmed.edu">gradregistrar@einsteinmed.edu</a> ).				
PRIN	T NAME:	TDCT)	(MIDDLE)	(I AST)	
(FIRST)			(MIDDLE)	(LAST)	
PREV.	IOUS DEGRI	EES: Degree Date	Name of Degree Institution		