

REPLACEMENT DIPLOMA REQUEST

STEP 1: Submit completed form to Records Office (located in the Whitcomb Student Center). STEP 2: Pay the \$35 fee to Business Office (located in the Administration Building).

OR	SITS OF SSN:		
NAME:			
	(if has changed):		
MAILING ADDR	ESS:		
СІТҮ:		STATE:	ZIP:
	PROGRAM OF STUDY:		GRADUATION DATE:
DegreeDiplomaCertificate			

NUMBER REQUESTED: _____

_ (\$35 fee per diploma applies)

Date

The \$35 fee (per diploma) must be paid at the time the request is submitted. Orders may take 8-12 weeks for delivery. Replacement diplomas are issued with "Issued as a replacement diploma" text and are signed by current administration. Graduate will be contacted via telephone at the number provided when the diploma is available.

Student signature

RECEIVED:

Unless sent from an official Rockingham Community College email account, this form must have a handwritten signature.

Student signature	Date	-
	OFFICE USE ONLY	
RECORDS	FEE PAID	
Initials/date	Receipt #	_