



## DUPLICATE DIPLOMA REQUEST FORM

Date: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name/Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zipcode: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Degree Type Earned: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

I \_\_\_\_\_, request a duplicate diploma for the following reasons:

The original diploma was (please check one): \_\_\_\_\_ Lost \_\_\_\_\_ Stolen \_\_\_\_\_ Destroyed

Signature \_\_\_\_\_

Check one Below:

- I would like to **pick up** my diploma at the Registrar's Office.
- If you are requesting for your diploma to be mailed, please enclose a self-addressed prepaid envelope (U.S. Mail, DHL, FedEx, etc.) with your Diploma Mail Request Form. The prepaid envelope must be at least 9 ¾ x 12 ½ for the mailing of the diploma.

**Send Money Order or Check** (including prepaid envelope if applicable) **in the amount of \$16.00 payable to:**

The City College of New York  
Office of the Registrar  
160 Convent Avenue, Room A-102  
New York, NY 10031



State: \_\_\_\_\_ County: \_\_\_\_\_  
Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary

Place notary stamp in box

**The City College of New York regrets that we cannot be responsible if the diploma is lost, stolen, or damaged in the mail. In the event that you do not receive your diploma or it is damaged, you will be responsible for ordering a replacement copy and for all associated fees. Thank you for your understanding.**