



DIPLOMA/CERTIFICATE REPLACEMENT ORDER FORM

Complete this form and sign below. PLEASE *PRINT* CLEARLY.

DIRECTIONS:

- Please complete and sign the Replacement Diploma/Certificate Order Form
- Make check or money order payable to Victor Valley College in the amount of \$15
- Submit form to the Admissions and Records office, Bldg 23 or mail to:

Victor Valley College
 Admissions & Records
 18422 Bear Valley Rd
 Victorville, CA 92395
- Please allow 4-6 weeks for delivery

| | | | |
|---|--|----------------------|--|
| Last Name (current) | | | |
| First Name | | | |
| Middle Name | | | |
| VVC Student ID or Social Security number | | Date of Birth | |
| Phone number | | | |
| Email Address | | | |

DEGREE/CERTIFICATE INFORMATION:

| | | | |
|---|--|--|--|
| Name issued to on original diploma/certificate | | | |
| Date of Graduation or Date Certificate Issued | | | |
| Degree Major or Certificate Name | | | |
| List any graduation honors or PTK | | | |

Mail to:

 Hold for pick up

| | | | |
|------------------------------|--|--|--|
| Name | | | |
| Street | | | |
| City, State, Zip Code | | | |

Signature: _____ **Date:** _____

| | | | |
|-----------------------------------|----------------------|----------------------------|--|
| <i>For Office Use Only</i> | | | |
| Date Received _____ | | Rec'd by A&R Initial _____ | |
| Amount Paid _____ | Bursar Initial _____ | Date Sent _____ | |