



## REQUEST FOR REPLACEMENT DIPLOMA

FAX #: (323) 341-4886

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name under which you attended: \_\_\_\_\_

Graduation Year: \_\_\_\_\_ Major(s): \_\_\_\_\_

Name on diploma: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_

### MAIL TO:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Replacement Diploma charge \$50.00.**

**Express Charge \$25.00 (mailed within 24 Hrs from receipt of request)**

**Authorized amount to charge (total) = \_\_\_\_\_**

\*checks payable to *Occidental College*. If paying by credit card, complete the section below.

VISA     MASTER CARD     DISCOVER

Name on card: \_\_\_\_\_

Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

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