

SANDHILLS COMMUNITY COLLEGE

3395 Airport Rd * Attn: Business Office
Pinehurst, North Carolina 28374
Fax: (910) 246- 4113

DIPLOMA REPLACEMENT REQUEST FORM

Business Office Only:

Amount Received: \$ _____
Receipt Number: _____
Received By: _____
Date Received: _____
Holds Checked/Removed:

TODAY'S DATE: _____

NAME FOR YOUR DIPLOMA: _____

PREVIOUS/ MAIDEN NAME(S): _____

DATE OF BIRTH: _____

DEGREE OBTAINED: _____

APPROXIMATE GRADUATION DATE: _____

*CELL PHONE NUMBER: () _____

*EMAIL ADDRESS: _____

MAILING ADDRESS: _____

SIGNATURE: _____

*THESE ARE REQUIRED SO THAT PARCHMENT CAN COMMUNICATE WITH YOU REGARDING YOUR REPLACEMENT DIPLOMA AND FOR YOU TO CLAIM YOUR AWARD.

Diploma Replacements are processed within 7 business days
PLEASE CHECK YOUR EMAIL FOR UPDATES FROM PARCHMENT

DIPLOMA REPLACEMENTS ARE \$10.00 PER COPY

If you want to send this request via fax, print your American Express, Discover, MasterCard, or Visa credit/ debit card number below (**include the expiration date, CVV code and the amount of the payment**). Fax to (910) 246-4113 or mail your check or money order to: **Sandhills Community College, Attn: Business Office, 3395 Airport Rd., Pinehurst NC 28374**

Card Number: _____ Exp. Date: _____ Amount: \$ _____

CVV Code: _____ (the CVV code is the last 3 digit number located on the BACK of your card. The CVV code on the American Express cards is located on the FRONT above the end of your card number).

ALL Financial obligations to Sandhills Community College must be met before Diploma Replacements can be issued

For Office Use Only:

Degree

Student ID Number

Associate/ Certificate/Diploma
