



HARTNELL COLLEGE DUPLICATE DIPLOMA REQUEST

Degree/Cert Earned Date: _____

NAME _____
Last First Middle Previous Name Used

PRINT YOUR NAME EXACTLY AS YOU WISH TO APPEAR ON YOUR DEGREE OR CERTIFICATE:

Address _____
Street City State Zip

Phone _____ **Student ID#:** _____ **DOB:** _____

Student Signature: _____ **Date:** _____

Diplomas are ordered on the last business day of every month and printing takes 1-2 weeks. Your diploma/certificate will be mailed to the address above. No diploma/certificate will be produced if the student has an outstanding balance with the College. If you have any questions or concerns, please call (831) 755-6711.

A charge of \$20.00 per Diploma/Certificate applies. If ordering by mail/fax, please send check, money order, or credit card information to:

Hartnell College
ATTN: Admissions & Records/Evaluations
411 Central Ave.
Salinas CA 93901
Fax - (831) 759-6014

- FOR CASHIER'S OFFICE USE ONLY -

Fees Due: \$ _____ **Cashier Initials/Date:** _____ **Receipt #:** _____

_____ ☐ Check or Money Order is enclosed ☐ Please charge my Visa/Mastercard

VISA/MC Cardholder Name _____ Sale Amount \$ _____

Card # _____ Expiration _____ CVC # _____

CVC# is the last three numbers located on the signature strip on the back of your credit card.

Student Signature: _____ **Date:** _____

- FOR ADMISSIONS & RECORDS OFFICE USE ONLY -

Associate of Arts/Science Degree in: _____

Graduation Date: _____ **Honors:** _____

Certificate of Achievement in: _____

Graduation Date: _____

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Received by: _____ Date: _____ Processed by _____ Date _____