

Diploma Replacement Order Form

Complete reorder form and submit your request with the \$25.00 replacement fee **(cashier's check or money order only).** Requests cannot be honored from those students whose financial and academic records at the college are not in good standing. Return completed form, along with payment and a copy of your driver's license to:

South Plains College Admissions & Records Office – Box C Attention: Graduation Clerk 1401 S College Avenue Levelland TX 79336

PRINT YOUR NAME EXACTLY AS YOU WISH FOR IT TO APPEAR ON YOUR DIPLOMA.

Name:				
Mailing Address:	City	State	Zip Code	
Home Phone Number:	Cell Number	r:		
Social Security Number: (Your social security number is being requeste assurance that the correct student record is be	ed because it is a unique identification nu	mber that is maintained for	r the purpose of	
Email Address:Use above information to update	my contact information at South Pla			
Degree Received:				
Graduation Date: Month:	Day:	Year:		
Major:				
Select one:	a. I will pick up my diploma.			
Student's Signature:		Date:		
	FOR OFFICE USE ONLY			
Date Processed:	Date Mailed/Picked	Date Mailed/Picked Up:		
Processed By:	Paid:	Cashier's Check/	'Money Order	