

REQUEST FOR DUPLICATE DIPLOMA

Office of the Registrar

Fax: (323) 341 – 4886 Email: registrar@oxy.edu

Full Name: _____

Email: _____

Name under which you attended: _____

Graduation Year: _____ **DOB:** _____

Request:
Select all that apply

- Duplicate Diploma (\$50)
- Diploma Cover (\$10)
- Notarized Copy (\$15)

Major(s): _____

Permanent Address:

Street City State Zip Code

If the duplicate diploma must be shipped to a third party, please provide the address below:

Street City State Zip Code

I understand that my request will be processed and shipped within 7-10 business days.

Signature

Date

PAYMENT INFORMATION

If paying by check, please make checks payable to Occidental College. If paying by credit card, complete the section below.

Authorized amount to charge (total): _____

Occidental College offers Express Shipping via FedEx. If you would like the Registrar's Office to ship your diploma via FedEx please contact registrar@oxy.edu to discuss additional cost prior to submitting this form.

VISA

MASTER CARD

DISCOVER

Name on card: _____

Card Number: _____ Expiration Date: _____

Signature

Date