



REQUEST FOR A REPLACEMENT DIPLOMA

Please complete the form below and include a \$25 check for each replacement copy payable to **Naugatuck Valley Community College**. Please mail it to:

Naugatuck Valley Community College
Attn: Office of the Registrar, K 516
750 Chase Parkway
Waterbury, CT 06708

Upon payment, we will process your request which may take 8-12 weeks for delivery. Your replacement diploma may be different from the original. The College officials' signatures may be those for the current year's class.

Name while attending: _____ Student ID: @ _____
Last First

Mailing address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Last 4 of Social Security #: _____ Email: _____

Student name as it should appear on Diploma: _____

Degree (A.A. A.S.): _____ Major: _____

Certificate: _____

Date Degree or Certificate awarded: _____

Signature: _____