

**Wytheville Community College  
Admissions and Records Office**

1000 East Main Street  
Wytheville, VA 24382  
276-223-4701  
Fax: 276-223-4860

**REQUEST FOR REPLACEMENT DIPLOMA**

**Please print all information below. Please list your name as you want it printed on your diploma, including full middle name, if desired. Please inform the college if your phone number or address changes before your request for a duplicate diploma is processed.**

Name (how it should be listed on the diploma): \_\_\_\_\_  
First Middle Last

Student ID#/SSN: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Curriculum/Plan: \_\_\_\_\_ Date/Year Degree Awarded: \_\_\_\_\_

There is a \$10.00 fee for each duplicate degree/certificate/diploma you request. Payment is due at the time you submit your request. Please make checks payable to Wytheville Community College. Mail form and check to the address above.

**It will take 6-8 weeks for duplicate diplomas to be delivered.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date