



SANTA ANA COLLEGE

REQUEST FOR A DUPLICATE DIPLOMA/CERTIFICATE

*****THERE IS A \$10 FEE FOR EACH DUPLICATE AWARD REQUESTED*****

Make checks payable to ***Santa Ana College***. Allow two to four weeks for delivery.

Name: _____

Student ID/SSN #: _____

Date(s) Awarded: _____ Type of Award(s): _____ AA/AS _____ Certificate

Major(s): _____

Print your name EXACTLY as you wish it to appear on your diploma/certificate:

1. I wish to pick up my diploma/certificate.

Please call or email me at: () _____
_____ @ _____

OR

2. Please mail my diploma/certificate to:

Signature _____ Date _____

Please submit this form along with payment to the Graduation Office:

**Santa Ana College
Graduation Office, Room S-104
1530 W. 17th Street
Santa Ana, CA 92706**

Graduation Office 714-564-6052