

## **Aaron's Academic Apparel** & Graduation Products

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## **REQUEST FOR DIPLOMA REPRINT**

Please **print** all of the requested information clearly

Students name: (as it is to be printed)
School name:
Date diploma awarded:
Given this date: MM/DD/YY or given this month: MM/YY
Authorized by Registrar or Secretary (Print name):
Signature of the above:
Authorized by Principal (Print name):
Signature of the above:
By this form we hereby authorize and approve the request for the reprinting of diploma for the above-named graduate. We have verified and confirmed the information by our records and do hereby approve the request for the re-printing of the diploma.
<b>Note</b> : Diplomas will be printed with the current names of Administrators on file: Principal, Superintendent, and or Members of the Board of Education.
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Adrress where the diploma is to be mailed:
City: State: Zip code:
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Cost is \$35.00 please remit this form with your payment in the form of a money order or cashiers' check.

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