

## Replacement or Initial Diploma Request Form

Complete the entire form, sign and date it before submission. *The Family Education Rights & Privacy Act of 1974 (FERPA) requires a student's signature on this form for Chippewa Valley Technical College (CVTC) to process and release the replacement or initial diploma.*

Replacement Diploma

Initial Diploma

First Name: \_\_\_\_\_ Middle Initial/Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Previous Name(s) if any: \_\_\_\_\_

Program or degree earned: \_\_\_\_\_ Month/Year of completion: \_\_\_\_\_

Email address \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street

City

State/Zip

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***\*Please send completed form and payment to CVTC at the below address or by fax.***

### Indicate Payment Option for \$5.00 Fee:

Cash

Check No. \_\_\_\_\_ payable to "CVTC"

Credit or Debit Card

*If you would like to pay with Credit or Debit Card, you must pay over the phone at 715-833-6200 or in person at the Chippewa Falls Campus, Menomonie Campus, River Falls Campus, or the Business Education Center in Eau Claire.*

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### OFFICE USE ONLY:

Fee Deposit Date: \_\_\_\_\_ Date Replacement Sent: \_\_\_\_\_ Processed By: \_\_\_\_\_

Records & Registration Office  
620 West Clairemont Avenue, Eau Claire, WI, 54701-6121  
Telephone Number: 715-833-6200 Fax Number: 715-831-7202