**Replacement Diploma Request Form**

**STUDENT INFORMATION:**

(Please Print) Name (as it was on school records): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Name (if same, write SAME): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Graduation Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A copy of your State or Federal photo ID must be attached to this form.

**FORM OF DELIVERY:**

\_\_\_\_\_I will pick up (current Photo ID required)

\_\_\_\_\_I authorize the following person to pick up my diploma:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Current photo I.D. required)

\_\_\_\_\_Mail to Current name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note: If you wish to have diploma mailed you agree **not** to hold Knight High School

responsible if diploma is lost or damaged in the mail.

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

Note: Replacement diplomas may take up to 8 weeks for processing. Initials\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Replacement Diploma $35.00 Diploma covers are $8.00.**  
Cash or Money Order made payable to Knight High School. No Personal Checks.

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| **For KHS Office Use Only**  Request received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transcript mailed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Verified graduation date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Ordered:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Jostens Order No. |

Mail completed requests to:

**Knight High School**

**Attn: Records Office**

**37423 70th St. East**

**Palmdale, CA 93552**