

JEFFERSON COMMUNITY AND TECHNICAL COLLEGE

DUPLICATE CREDENTIAL REQUEST

This form is used to request a duplicate credential (i.e., certificate, diploma, degree). Please complete the information below as accurately as possible. Failure to supply requested information may result in your request being delayed. The credential will be mailed to the address you list below. Please use a separate form for each credential requested.

FEE CHARGED: There is a \$20.00 fee per each credential requested.

**MAKE MONEY ORDERS PAYABLE TO JCTC.
PAYING WITH A PERSONAL CHECK WILL DELAY THE PROCESSING BY AT LEAST THREE WEEKS.**

Mail or return this form (along with the \$20.00 fee) to:

Jefferson Community & Technical College
ATTN: Assistant Registrar
109 E. Broadway
Louisville, KY 40202

Current Name: _____

Name Credential was awarded under: _____

Social Security # or Student ID #: _____ Telephone #: _____

Address credential will be mailed to: _____

Credential requested: ___Certificate ___Diploma ___AA ___AS ___AAS

Area of concentration or major: _____

When was the credential awarded: Year _____ Semester _____

Print your name EXACTLY the way you want it to appear on the credential (titles such as Mr., Mrs., etc., will not be used):

WHITE COPY: RECORDS' OFFICE

YELLOW COPY: BURSAR'S OFFICE

PINK COPY: GRADUATE

Office Use Only

Amount Paid: \$ _____

CASH _____ MO # _____

Date Received: _____

Received by: _____

Chart String: 804160017085

(revised 02-22-10)