



Diploma Reprint Request

Name: _____
Last First Middle Initial

Phone Number: _____ Email: _____

Student ID#: _____

OR Date of Birth: _____ AND Last 4 of SSN: _____

of Reprints _____ Fee \$ _____ (\$10.00 per diploma reprint, \$15.00 cover, \$25.00 diploma and cover)

Term and Year of Graduation: _____
Term (Spring, Summer, Fall) Year

Check One:

_____ Please hold my diploma reprint for pick up in the Admissions Office.

_____ Please mail my diploma reprint to the following address:

Street Number Street Name

City State Zip Code

Ways to Submit Payment:

Payment may be called in to the Business Office (850) 769-1551 x 3879 or paid in person in the Administration Building. A receipt must accompany request.

Ways to Submit Request:

1. In person in the Admissions Office with proof of payment from the Business Office.
2. FAX this completed form with a copy of your photo ID bearing signature and proof of payment from the Business Office to 850-913-3308.
3. Email this completed form with a copy of your photo ID bearing signature and proof of payment from the Business Office to GCSCGRADUATION@gulfcoast.edu
4. Mail this completed form with a copy of your photo ID bearing signature and payment in the form of check or money order payable to Gulf Coast State College to:
Admissions & Records
Attn: Graduation Specialist
5230 W Hwy 98
Panama City, FL 32401

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FOR OFFICE USE ONLY

Degree Verified _____ Diploma Reprinted _____ Diploma Mailed or Picked Up _____

Additional Cover _____ Reprint completed by _____