

Orange County Department of Education Alternative, Community, and Correctional Education Schools and Services Attendance and Records Center Mailing address: PO Box 9050, Costa Mesa, CA 92628-9050 Pick up/Physical address: 601 S. Lewis Street, Orange, CA 92868 Office (714) 547-9972 Fax (714) 547-2344 Email: accesstranscripts@ocde.us

## **DIPLOMA RE-ORDER**

STUDENT/PARENT REQUEST FORM FOR DIPLOMA RE-ORDER ONLY For diploma approval, <u>teacher</u> must complete a "Diploma Request" form

Please fill out comp	letely and return	to ACCESS Atter	idance and Recor	ds Office

Diploma may only be picked up by parent(s)/ legal guardian(s) or student (If over 18). This form to be filled out by student, parent/legal guardian only. *Not for school/teacher use*.

DATE:						
STUDENT'S NAME (while attending):		DATE OF BIRTH	:			
MAILING ADDRESS:						
CITY:	STATE:	ZIP COD	E:			
YEAR GRADUATED:						
TEACHER'S NAME (if possible):			treet name/cross street)			
	TELEPHONE #:					
RELATIONSHIP:	SIGNATURE:					
REASON FOR REQUEST:		Parent/Legal Guardi	an/Student			
LOST ORIGINAL DIPLOMA	NEVER RECEIVED DIPLO	DMA NEED CO	PY OF DIPLOMA			
<u>PLEASE CHECK ONE:</u>						
<ul> <li>MAIL DIPLOMA (10-12 BUSINESS DAYS FOR PROCESSING)</li> <li>PICK UP DIPLOMA (7-10 BUSINESS DAYS FOR PROCESSING)</li> </ul>						
You will be called when your diploma is ready for pick up. If diploma is not picked up from our office within 5 business days of						
call, it will be mailed to the above address.		eu up nom our onice with	in 5 busiless days of			
ATTENDANCE AND RECORDS OFFICE USE ONLY (MUST BE COMPLETED):						
STUDENT'S LOCATION IN COMPUTER SY	STEM: YEARS	CHOOL CODES	ГUDENT #			
IF NOT IN COMPUTER SYSTEM PLEASE IN	IDICATE LOCATION:					
COMPLETE TRANSCRIPT:  □ Yes □ 1	No	GRAD CHECK:	🗆 Yes 🗆 No			
PROGRAM DATA TECHNICIAN INITIALS:	D	DATE COMPLETED:				
DATE PICKED UP:	D	DATE MAILED:				
PERSON PICKING UP:						
Print Name	S	ignature	Relationship			