Career Training Academy
Training for a Lifetime™

FROM THE OFFICE OF THE REGISTRAR
179 HILLCREST SHOPPING CENTER
LOWER BURRELL, PA 15068 PHONE: 724.337.1000
EMAIL: rrock@careerta.edu FAX: 724.335.7140

REPLACEMENT DIPLOMA REQUEST FORM

NAME _____ MAIDEN NAME _____

EMAIL _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____ DATE OF BIRTH _____ YEAR ATTENDED _____

SOCIAL SECURITY _____ CAMPUS ATTENDED _____

I HEREBY GIVE MY PERMISSION TO SEND MY DIPLOMA.

_____ _____
SIGNATURE DATE

SEND DIPLOMA TO:

NAME _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

Office Use Only

Date Received: _____

Financially Cleared [Y] [N]

Date Mailed: _____

INSTRUCTIONS:

***NO DIPLOMA WILL BE ISSUED FOR STUDENTS OR ALUMNI WHOSE FINANCIAL OBLIGATION TO THE SCHOOL HAS NOT BEEN SATISFIED.**

***PROCESSING TIME IS 6-8 WEEKS.**

***DIPLOMAS WILL NOT BE FAXED OR EMAILED.**

PROCESSING FEE OF $10.00 PER REPLACEMENT DIPLOMA REQUEST.

[ ] CASH [ ] CHECK [ ] MONEY ORDER [ ] CREDIT CARD

* information will be redacted after processing

NAME ON CARD _____ BILLING ZIP CODE _____

CARD NUMBER _____ SECURITY NUMBER _____

EXPIRATION DATE _____