



DIPLOMA RE-ORDER FORM

Send Completed form to:

Middlesex Community College
Student Accounts Office
Cowan Center, 3rd Floor
33 Kearney Sq
Lowell, MA 01852

***\$30 Re-Order Fee Required- Please Pay in-person at the Student Accounts Office LC-317 or EC-225 M-F 8:30-4:30. During off hours, you will be contacted by a Student Accounts associate for payment remit.**

My degree requirements were completed at the end of the year and semester indicated:

YEAR: _____ Fall Spring Summer

Student Information:

Student ID# _____ Date of Birth ____/____/____ Sex: M F

Last Name: _____ First Name: _____ Middle Initial _____

Address: _____
Street City/ State Zip

Home Phone: _____ Cell Phone: _____

Email: _____

Degree Information:

First Program:

Degree Certificate

Program _____ Option _____

Second Program:

Degree Certificate

Program _____ Option _____

The exact way your name was printed on the diploma: [Note to student – please print legibly]

First Name Middle Name or Initial Last Name

Office Use Only(Use DIRF Detail Code):

Received By _____ Fee Paid _____ Date ____/____/____