

Merced College Duplicate Degree Request Form

Mail request to: Merced College Admissions and Records
 Attn: Evaluations, Stop 13
 3600 M Street
 Merced, CA 95348

Or Fax request to: (209) 384-6339

***The name on your degree or certificate will be re-issued as it originally appeared on your diploma**

Last Name: _____ First: _____ Middle: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Student ID or last 4 of SSN: _____ Date of Birth: _____

Year of Graduation: _____ Major: _____

Signature (For all Requests): _____ **Date:** _____

(By signing this form you understand that you must be available at the phone contact given below to provide valid Credit Card information to Student fees staff and are authorizing charges to the credit card you have provided them)

\$10.00 - Please have the Student Fees Office contact me to obtain credit card information at:

Phone No. _____ **Email:** _____



FOR ADMISSIONS OFFICE USE ONLY (Complete and forward to student fees)	
Major :	Award Verified:
Semester Awarded:	Date Award Mailed:

FOR FEES OFFICE USE ONLY (Process fees and forward request form back to Admissions for processing)	
Total Due : \$	Date Paid:
Total Paid: \$	Receipt #:
Pmt Recd by:	Date:
✂*****✂	
FOR FEES OFFICE USE ONLY (Detach this information prior to forwarding to Admissions)	
Credit Card Number:	CVC Code:
Name on CC:	Expiration Date: