



# Request for Replacement Diploma

*Print clearly or type.*

Allow ten days for processing. No request will be processed without payment. Mail complete, signed form and a \$25 check or money order (payable to NGTC) to the following address:

North Georgia Technical College  
Attention: Office of the Registrar  
PO Box 65  
Clarkesville, GA 30523

## Information

*Type or print legibly.*

Student ID # or last 4 digits of Social Security #: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name as you wish it to appear on diploma: \_\_\_\_\_

Name under which you attended NGTC (if different): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Program of Study: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

### For Office Use Only

Paid: \_\_\_\_\_ / \_\_\_\_\_ Mailed: \_\_\_\_\_ / \_\_\_\_\_ Picked Up: \_\_\_\_\_ / \_\_\_\_\_ Hold: ☐ Non-payment  
Date Initial Date Initial Date Initial ☐ Other financial obligation

As set forth in its student catalog, North Georgia Technical College complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, creed or religion, national or ethnic origin, sex (including pregnancy, sexual orientation, and gender identity), disability, age, political affiliation or belief, genetic information, veteran or military status, marital status, or citizenship status (except in those special circumstances permitted or mandated by law). The following persons have been designated to manage inquiries regarding the non-discrimination policies: Dr. Vinson Burdette, VP of Student Affairs, Title IX Coordinator, Clegg Center 211, (706) 754-7711, [vinson.burdette@northgatech.edu](mailto:vinson.burdette@northgatech.edu) and Kay Carroll, Special Populations and Retention Coordinator (Section 504), Clegg Center 214, (706) 754-7828, [kay.carroll@northgatech.edu](mailto:kay.carroll@northgatech.edu) at 1500 HWY 197 N, Clarkesville, GA 30523.

This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).

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