



**Award Reprint Request**

Use blue or black ink and **PRINT** clearly:

Student Name to appear on Award

Student LoLA ID

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**Instructions: Complete form to obtain a reprint of certificate/degree/diploma. Reprints cost \$25 each and will be mailed to you. Please use a separate form for each request. Forms must be submitted to [studentaccounts@solacc.edu](mailto:studentaccounts@solacc.edu). A charge will be placed on your LoLA account, and the request will be sent to us once payment is made online. If paying by check, mail form and payment to SLCC Student Accounts, 1101 Bertrand Dr., Lafayette, LA 70506.**

**Please Note: Reprints are processed only three times per calendar year (January, June, and September), and are mailed in these months after the commencement ceremony.**

Term: Semester \_\_\_\_\_ Year \_\_\_\_\_

**Check the credential to be reprinted:**

- Associate of Arts
- Associate of Science
- Associate of Applied Science
- Associate of General Studies
- Certificate of Technical Studies (Terminal awards only)
- Technical Diploma

Name of Program/Major: \_\_\_\_\_ Add to Award: \_\_\_\_Yes \_\_\_\_No

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

***For Office Use Only***

<b>Administrative Fee Payment</b>	
Reprint Fee Paid \$ _____	(\$25 per award/print)
Payment Method: ____Cash ____Check ____Money Order ____Credit Card _____	
Received By: _____	Date: _____
<b>Processing Authority</b>	
Request Received Date: _____	Reprint Completed: _____ Student Contacted: _____
Registrar's Office: _____	Date: _____