



# Faulkner University

-----A CHRISTIAN UNIVERSITY-----

Registrar's Office  
5345 Atlanta Highway  
Montgomery, AL 36109  
Fax#: 334-386-7244  
E-mail: [registrar@faulkner.edu](mailto:registrar@faulkner.edu)

## DUPLICATE DIPLOMA REQUEST FORM

.....

This is a request form to order replacement or additional copies of a Faulkner University/Alabama Christian College diploma. The fee for each copy is \$15.00 and the form can be mailed, faxed or e-mailed. Please allow five (5) business days in order to process your request.

Legal Student Name: \_\_\_\_\_  
(Name printed on diploma as listed in academic software)

ID and or SS #: \_\_\_\_\_ Degree & Year: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_

Number of Copies: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----

### PAYMENT

[www.faulkner.edu/payments](http://www.faulkner.edu/payments)

Make payment and write the confirmation number here: \_\_\_\_\_