



**CCNY**

The City College of New York  
Office of the Registrar, A-102  
Tel:(212)650-7853 Fax:(212)650-6108

## *Diploma Mail Request*

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**Student Name** (Please Print):

**Student I.D. #:**

**Telephone:**

**E- mail:**

**Undergraduate** (BA, BS, BFA, etc.):

**Graduate** (MA, MS, MSED, etc.):

**Major** (Music, Art, Biology, etc.):

**Month/Year Degree Earned** (May 1992, Sept 2008):

**Instructions:**

- If you are requesting for your diploma to be mailed, please enclose a self-addressed prepaid envelope (U.S. Mail, DHL, or FedEx) with your Diploma Mail Request Form.
- The prepaid envelope must be at least 9 ¾ x 12 ½ for the mailing of the diploma.

**Return form and prepaid envelope to:**

The City College of New York  
Office of the Registrar, A-102  
160 Convent Avenue  
New York, NY 10031

Signature

Date

**The City College of New York regrets that we cannot be responsible if the diploma is lost, stolen, or damaged in the mail. In the event that you do not receive your diploma or it is damaged, you will be responsible for ordering a replacement copy and for all associated fees. Thank you for your understanding.**