



TECHNICAL COLLEGE DUPLICATE DIPLOMA FORM

Diploma will be:

- ☐ Picked up by me
- ☐ Picked up by designated person (ID required)
- ☐ Mail via US Mail

Please Print Clearly

All Blanks Must Be Completed

*Student Name (Last, First Middle)				*Social Security # (last 4 digits)	XXX-XX-	
*Street Address					*Phone Number	
*City		*State		*Zip Code		E-mail

Program of Study		Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date Attended FROM		Date Attended TO		

(If unknown, use approximate dates)

For payments call 225-752-4233 ask for Accounting Department

Picked Up

Person designated to pick up transcript (ID required)	
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Mailed To:

Name/School/Organization			
*Street Address			
*City		*State	
		*Zip Code	

*Signature of Student

*Date

*Required Fields

Allow 30 Days Process Time

Please Mail, Fax, or E-mail Diploma Request To:

Duplicate Diploma Request
13944 Airline Highway
Baton Rouge, LA 70817
Phone: (225) 752-4233
Fax: (225) 756-0903
E-mail: reception@iticollege.edu

Diplomas are disseminated as long as all financial obligations have been met. The school does not release transcripts on any previously enrolled student who has not met their financial obligations to the school as determined by the Accounting Department.