



Replacement Diploma Request

Replacement diplomas are **not copies** of the original diploma. Replacement diplomas are printed using the current diploma layout and are marked "replacement."

To request a replacement diploma complete and submit this form. **Payment of \$15.00 is required. Payment may be by check or money order if sent by mail; cash is acceptable if submitted in person. Checks or money orders must be made payable to FCPS.** Allow at least 45 days for delivery of a replacement diploma. If proof of graduation is needed sooner than 45 days, a transcript that shows graduation may meet your needs.

To request a transcript, use the form found at: <https://www.fcps.edu/sites/default/files/media/forms/it9.pdf>

If the personal information you provide is not complete and accurate, your request will be returned. Please note that your FULL LEGAL NAME, as it appeared on your school records, is required in order to process your request. Replacement diplomas will be sent by U.S. Mail to the address provided by the requesting graduate.

Last (Maiden)	First	Middle
Date of Birth	High School Where Diploma was Earned	Year Graduated

Mail To _____	Address _____
City _____	State _____ Zip Code _____ Country _____

\$15.00 payment is included A copy of my driver's license (or other government issued ID) is attached
This requirement is to aid us in confirming your identity.

Signature (needed to process request)	Date	Contact Phone
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Where to send your request:

Graduated within last 5 years

Send to the graduating school, Attention: Registrar.
 Here is a link to our directory of schools and mailing addresses. <https://www.fcps.edu/schools-centers>

Graduated more than 5 years ago

Fairfax County Public Schools
 Attention: Registrar
 3701 Franconia Road
 Alexandria, VA 22310

For FCPS use only

<input type="checkbox"/> Graduation and Personal Details Confirmed	<input type="checkbox"/> Graduation and Personal Details not Confirmed
Disposition <input type="checkbox"/> Forwarded to print vendor	<input type="checkbox"/> Returned to Requestor

Graduation Date _____ (M/D/YYYY)