

**Registrar's Office**  
P: 603-230-4014  
F: 603-230-9314  
[NHTIRegistrar@ccsnh.edu](mailto:NHTIRegistrar@ccsnh.edu)

## Replacement Diploma/Certificate Form

Check which name you'd like printed on your replacement document:

- Current name: \_\_\_\_\_
- Name on original document: \_\_\_\_\_

NHTI Student ID # or last 4 digits of SS# \_\_\_\_\_ Date of birth \_\_\_\_\_ Phone # \_\_\_\_\_

Degree awarded \_\_\_\_\_ Year of completion \_\_\_\_\_

Email: address \_\_\_\_\_

Mail Certificate to: \_\_\_\_\_

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

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Payment Options

A \$20.00 processing fee must accompany this form.

- Cash       Check (payable to NHTI – Concord's Community College)
- Credit/debit       Mastercard       Visa       Discover

\_\_\_\_\_

Name on card (if different from above) \_\_\_\_\_ Exp. date \_\_\_\_\_ CV code \_\_\_\_\_

Account number \_\_\_\_\_

Billing address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Updated 02-23