



NEW YORK CITY COLLEGE OF TECHNOLOGY

Office of the Registrar
300 Jay Street, Brooklyn, NY 11201
Telephone (718) 260-5800

DEGREE REPLACEMENT FORM

Using your campus email, please send completed form to Degrees@citytech.cuny.edu

PLEASE READ CAREFULLY :

- The fee is **\$30** for EACH degree and you will be alerted when you can pay the fee via [CUNYfirst](#).
- This form is to **replace** lost, stolen, damaged, or purged degrees.
- Replacement degree will list your name while in attendance unless appropriate documentation is submitted for a name change.
- Replacement degree will have the current college's name.
- A digital copy of your diploma will be sent via the email address you provided.
- A paper copy of your diploma will be sent via the mailing address you provided.

EMPLID: _____ Date of Birth : _____ / _____ / _____

Student Name _____
Last First MI

NAME MUST MATCH NAME UNDER WHICH YOU ATTENDED

Graduation Date (Month/Year): _____ Degree Type: _____

Phone #: _____ Email: _____

Street Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Signature: _____

In the absence of a written signature: submission from your campus email to Degrees@citytech.cuny.edu will suffice.

OFFICIAL USE ONLY

Processed by: _____

Date Fee was added: _____

Date payment was cleared: _____

Date Ordered: _____

Signature: _____