



**THE COLLEGE OF THE FLORIDA KEYS  
APPLICATION FOR REPLACEMENT DIPLOMA**

There is a \$25.00 charge for replacement diplomas.  
For assistance completing this form contact Enrollment Services at 305-809-3188.

**Date of Request:** \_\_\_\_\_  
MM/DD/YY

**Select your payment option:**

\_\_\_\_\_ USPS mail this completed form along with a check or money order to:  
CFK Admissions, 5901 College Road, Key West, FL 33040

\_\_\_\_\_ Fax to 305-262-5163. You may also scan or cell-phone photo this form then email to  
admissions@cfk.edu  
Call the Business Office at 305-809-3186 to pay via credit or debit card.

**NAME** (Please print your name **EXACTLY** as you want it to appear on your diploma).

\_\_\_\_\_

First	Middle	Last
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\_\_\_\_\_

Student ID Number or  
Last 4 digits of your SS#

\_\_\_\_\_

Date of Birth MM/DD/YY

**ADDRESS** (Your diploma will be mailed approximately 1 month after receipt of payment.)

\_\_\_\_\_

Street

\_\_\_\_\_

City	State	Zip Code
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\_\_\_\_\_

Telephone

**DEGREE/CERTIFICATE EARNED** \_\_\_\_\_  
(Please indicate exact program title.)

**MONTH AND YEAR OF DEGREE** (approximate) \_\_\_\_\_

**Student Signature** \_\_\_\_\_

**Business Office Validation:** Payment received \_\_\_\_\_ Date \_\_\_\_\_