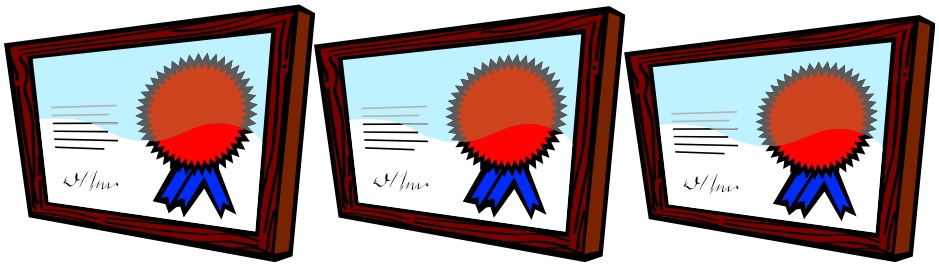
# Winston Churchill High School

## Diploma Request Form



Date of Request _____

Full Name _____
*First* *Middle* *Last*

Maiden Name _____

Name as it is to appear on the diploma _____

Phone Number _____ Alternate Phone Number _____

Street Address _____

City _____ State _____ Zip Code _____

E-mail address _____

Last Year Attended _____ Birth Date _____

Graduate's Signature _____

***$30.00* for a new diploma to be ordered**
***Additional $10.00 for red cover***

Please make all checks payable to ***Livonia Public Schools***, and send all payments to
***Churchill High School*, *Guidance Office,***
***8900 Newburgh Rd., Livonia, MI 48150***

Please note that diploma's are not mailed. You will receive notification that the diploma has arrived at Churchill High School and you will need to make arrangements to pick it up. Proper ID will be required.

Revised 1/12

***Office Use Only:*** **Request & Payment Received_____**

**Payment:** Cash/Check #_____ Amount_____

**Date diploma was ordered (via e-mail)** _____