DIPLOMA / CERTIFICATE TO BE ISSUED (check appropriate box)

State Form 47944 (11-96)

High School Diploma

🗌 G.E.D. Diploma

Vocational Certificate

Vocational Area

Student's name as is to be printed on diploma / certificate (please print)							
ase print)							
.		D 00					
Iotal hours accrued							
Signature of person preparing request							
Photocopy made Both mailed to Super- intendent for signature	Returned to Education Office	Issued (note details)					
		Date mailed (mo., day, yr.)	Date given (mo., day, yr.)				
Date (month, day, year)	Date (month, day, year)	Given by:					
	Fotal hours accrued	Total hours accrued ☐ Photocopy made Both mailed to Super- ntendent for signature	Fotal hours accrued DOC number Date signed (month, day, ye Photocopy made Both mailed to Super- Network for signature Returned to Education Office Issued (note details) Date mailed (mo., day, yr.)				



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Date to be printed on diploma / certificate (month, day, year) Total hours accrued			DOC number					
Signature of person preparing	request	Date signed (month, day, year)						
Recorded Cum. Card and Master File and sent to be printed	Returned to Education Office for signature	Photocopy made Both mailed to Super- intendent for signature	Returned to Education Office	Issued (note details) Date mailed (mo., day, yr.) Date given (mo., day, yr.)				
Date (month, day, year)	Date (month, day, year)	Date (month, day, year)	Date (month, day, year)	Given by:				



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