

# SKIDMORE

Name: \_\_\_\_\_ Class Year: \_\_\_\_\_

diploma in a new name and update the College [• Œ }Œ •X dZ]• } μ u v š š]}v u μ • š ]••μ  
judicial official.

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
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Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

I authorize Skidmore College to send a duplicate diploma on my behalf to the address below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_