

8th GRADE DIPLOMA ORDER FORM

SCHOOL: _____
(Please make sure school name is complete, this is how it will be on the diploma.)

DATE OF GRADUATION: _____

If possible please submit an Excel spreadsheet with Last Name, First Name, and Middle Name. You can email your spreadsheet to rachael.gil@seccsda.org. If you are not able to send a spreadsheet please **TYPE** below the names of your eighth graders. Use their full legal name as it will appear on the diploma. Please return this form to the OFFICE OF EDUCATION by APRIL 13, 2017.

1. _____	39. _____
2. _____	40. _____
3. _____	41. _____
4. _____	42. _____
5. _____	43. _____
6. _____	44. _____
7. _____	45. _____
8. _____	46. _____
9. _____	47. _____
10. _____	48. _____
11. _____	49. _____
12. _____	50. _____
13. _____	51. _____
14. _____	52. _____
15. _____	53. _____
16. _____	54. _____
17. _____	55. _____
18. _____	56. _____
19. _____	57. _____
20. _____	58. _____
21. _____	59. _____
22. _____	60. _____
23. _____	61. _____
24. _____	62. _____
25. _____	63. _____
26. _____	64. _____
27. _____	65. _____
28. _____	66. _____
29. _____	67. _____
30. _____	68. _____
31. _____	69. _____
32. _____	70. _____
33. _____	71. _____
34. _____	72. _____
35. _____	73. _____
36. _____	74. _____
37. _____	
38. _____	

USE ADDITIONAL SHEET IF NEEDED