



**STUDENT REQUEST TO MAIL DIPLOMA**

Student Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Phone Number (\_\_\_\_) \_\_\_\_\_ Personal Email \_\_\_\_\_

\_\_\_\_\_ I am a **May graduate**. Diplomas released for mailing as of June 5.

\_\_\_\_\_ I am a **January graduate**. Diplomas released for mailing as of February 1.

\_\_\_\_\_ I am a **Summer graduate**. Diplomas released for mailing as of August 9.

*\*\*If the address has changed from what is on file with SCVCS, proof of residence is required. The student/guardian assumes responsibility for any loss in transit. Should a replacement be required, the student/guardian will be required to go to the South Carolina State Department of Education to obtain it and will be required to pay the replacement cost.*

Diplomas may be picked up at graduation or from the SCVCS at no charge. To receive a diploma and cover by mail:

1. **For In State of South Carolina Pay the \$6.75 processing fee** via online payment.
2. **For Out of the State of South Carolina Pay \$7.75 processing fee** via online payment.

**Online Payment Link:** <https://ww2.payerexpress.com/ebp/SCVCS/>

(See the next page for directions).

**2. Return this form** by fax, email or mail as follows:

Email: [diploma@scvcs.org](mailto:diploma@scvcs.org)

Fax: 803-726-0541

Mail: SCVCS

Attn: Pam Helzer

2023 Platt Springs Road

West Columbia, SC 29169

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

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\*Parent or Guardian Signature if student is under 18 years of age \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only:** Amount Paid: \_\_\_\_\_ Process Date: \_\_\_\_\_ Mail Date: \_\_\_\_\_



**Payer Express Instructions**

Go to <https://ww2.payerexpress.com/ebp/SCVCS/>

**Payment Made on Behalf of**

**Student Last Name, Student First Name**

**Confirm Payment Made on Behalf of**

**Student Last Name, Student First Name**

Click  I'm not a robot

Click Pay Now


PAY NOW

Payment Made on Behalf of

STUDENT LAST NAME, STUDENT FIRST NAME

Confirm Payment Made on Behalf of

STUDENT LAST NAME, STUDENT FIRST NAME

 I'm not a robot



Pay Now

**Home:** Account Holder Information

- Name: First and Last Name
- Phone: Enter phone number and select type of phone
- Email: Email address
- Country: United States
- State: SC – South Carolina

**Payment Amount:**


- Enter the amount you are paying: **In state of SC \$6.75 Out of state of SC \$7.75**

**Choose the reason for your payment: 17 – Graduation Diploma**

**Payment Method:**


- Enter your Credit Card information.
- Choose the payment method that you entered.

**Pay Date: Today's Date**

Click  Continue to Payment

Home

<b>Name</b> FIRST NAME LAST NAME		<b>Phone</b> 803-673-1234 <span>Mobile ▾</span>		<b>Payment Amount</b> \$ 0.00	
<b>Country</b> United States ▾		<b>City</b> (optional)		<b>Choose Reason for Payment</b> Select Option ▾	
<b>Street Address</b> (optional)		<b>State</b> SC - South Carolina ▾		<b>Payment Method</b> Enter	
<b>Street Address Line 2</b> (optional)		<b>ZIP Code</b> (optional)		<b>Pay Date</b> 3/2/2022	

 Continue to Payment