

COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF EDUCATION  
P. O. BOX 2120  
RICHMOND, VIRGINIA 23218-2120

2004 DIPLOMA SEAL REQUEST FORM

*Please print or type*

Division Name \_\_\_\_\_

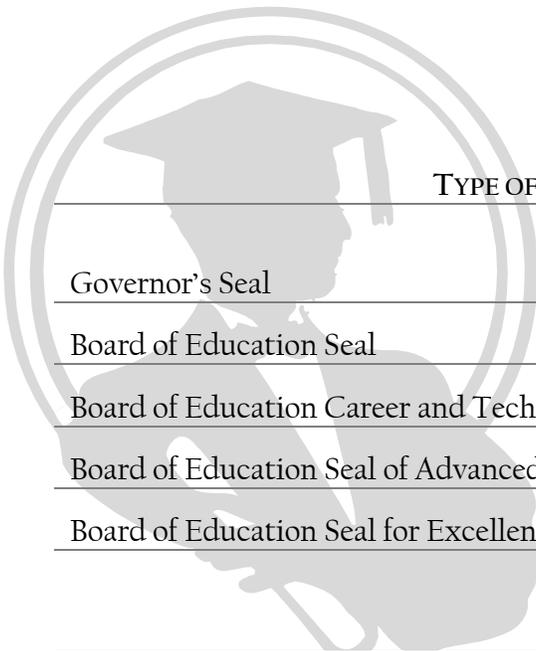
Central Office Contact \_\_\_\_\_

Street Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

Area Code, Telephone \_\_\_\_\_



TYPE OF SEAL	# OF SEALS NEEDED
Governor's Seal	
Board of Education Seal	
Board of Education Career and Technical Education Seal	
Board of Education Seal of Advanced Mathematics and Technology	
Board of Education Seal for Excellence in Civics Education	

\_\_\_\_\_  
*Signature of Division Superintendent*

**RETURN ON OR BEFORE APRIL 16, 2004 TO:**

Ms. Patricia Hicks  
Office of Communications  
Division of Policy and Communications  
Department of Education  
P. O. Box 2120  
Richmond, Virginia 23218-2120  
Telephone: (804) 225-2400  
Fax: (804) 225-4514