**SAMPLE application in case of loss of a diploma**

 TO THE RECTOR OF THE I. K. AKHUNBAEV KSMA

TO PROFESSOR KUDAIBERGENOVA I. O.

GRADUATE \_\_\_\_\_\_\_\_\_\_\_YEARS

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FACULTY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ full

name and phone number

**Application**

Please allow me to issue a duplicate diploma, in connection with the loss of the original diploma series\_\_\_\_\_\_\_\_\_\_\_, registration number\_\_\_\_\_\_.

 **date, signature**