



This form must be completed in full by the individual who owns the academic record. It can be submitted by one of these methods:

1. By email to [thelinc@uoguelph.ca](mailto:thelinc@uoguelph.ca). Staff will call you during business hours to collect your credit card information for payment. Please provide a phone number in Section C where you can be reached during our [business hours](#).
2. In person at the Lincoln Alexander Student Service Centre on the third floor of the University Centre.
3. By mail to the address below. You must complete section D of this form (Payment Information).

Lincoln Alexander Student Service Centre  
 Office of Registrarial Services  
 U.C. Level 3, University of Guelph  
 Guelph ON N1G 2W1

The fee for this service is \$60.00 per copy (includes HST). Please indicate the number of copies required \_\_\_\_.

**A. Personal Information**

Last Name: \_\_\_\_\_

First Name(s): \_\_\_\_\_

ID Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**B. Graduation Information**

Degree/Diploma Obtained (i.e., Bachelor of Science): \_\_\_\_\_

Date of Graduation Ceremony: \_\_\_\_\_

College Graduated From (i.e., Arts): \_\_\_\_\_

Honours or General Program: \_\_\_\_\_

Bachelor/Baccalaureate/Master/Magisteriate: \_\_\_\_\_

Exact way name is to appear on the parchment\*\*\*: \_\_\_\_\_

\*\*\*Note: If your name has changed since graduation, and you wish to have this new name appear on your parchment re-issue, or you want to have a middle name(s) added to it, you must provide legal documentation with this form (i.e., marriage certificate, legally notarized proof of name change, birth certificate, passport, etc.).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## C. Mailing Information

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

Apartment #: \_\_\_\_\_

City/Town: \_\_\_\_\_

Province/State: \_\_\_\_\_

Country: \_\_\_\_\_

Postal Code/ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_

**If submitting your request by email**, please provide a number that we can reach you at during our business hours. We will call you to facilitate the credit card charge over the phone before the order is processed.

Email: \_\_\_\_\_

## Method of Shipping

- Mail: **\$8 fee**
- Pick Up
- Courier (Ontario): **\$15 fee**
- Courier (Canada): **\$30 fee**
- Courier (USA): **\$50 fee**
- Courier (International): **\$75 fee**

**Purolator and Federal Express courier services will not deliver to a P.O. Box or Rural Route. It is the individual's responsibility to provide a complete and accurate mailing address when ordering parchments.**

## D. Payment Information (only required if submitting request **by mail**)

Visa or Mastercard are accepted for payment.

Visa or Mastercard Card Holder's signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Section D is continued on page 3.**

## Office Use

Date Request was Received: \_\_\_\_\_

Date Parchment was Processed: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

Amount Received: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

**D. Payment Information** (only required if submitting request **by mail**)

If submitting this form by **email**, **do not** complete this section.

Please indicate if payment will be through Visa or Mastercard.

Visa

Mastercard

Credit Card #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiry (mm/yy): \_\_\_\_\_ / \_\_\_\_\_

CVV #: \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_

**The card holder's signature is required on page 2.**

**Payment information will be destroyed upon successful payment process.**