

www.ocadu.ca
Office of the Registrar
100 McCaul Street, Toronto, Ontario Canada M5T 1W1
TELEPHONE 416.977.6000 FAX 416.977.4201
EMAIL: Regservices@ocadu.ca

Request for Transcript

## **Student Information (Please Print)**

NOTE: Official documents and records will not be released if you have any outstanding accounts at the university.

Last Name			First Name		OCAD U Student Number	OCAD U Student Number	
Former Surnam	nes (if applicab	le)	1		Birthdate (YYMMDD)		
Current Ma	ailing Addr	ess					
Apt/Unit#	Street #	Street Name			City	City	
Province			Postal Code		Country	Country	
Home Phone Number			Alternate Pho	ne Number	Personal Email Address	Personal Email Address	
I declare that I	am the individ	ual named above	and that this is my signa	ture. I authorize OCAD Un	iversity to release the information requ	uested below.	
Student Signature				Date			
When wou	ıld you like	your transc	ript?		*see n	otes on page 2	
O HOLD fo	or winter te or summer	erm grades to term grades	e released (end of to be released (end to be released (fin Fall (October)	of May) rst week of October	)	<b></b>	
Number of	Copies Re	quested:	12345	6 7 8 9 10			
○ I will pick up my transcript(s)			○ I authoriz	e	to pick up my	to pick up my transcript(s).	
Mail to: Regular Mail (no additional charge) *Please include additional sheets if insufficient space				Courier (Canada \$35/ United States \$50/ International \$100)  Recipient phone number required:			
Name							
Street # Street Name				Apt/ Unit#			
City				Province			
Postal Code				Country			
Fax (add	ame:	•					
OFFICE USE	E ONLY						
Received By	Date	Received	Fees Owing/Library	Date Completed	Student Notified: Emailed/Phoned	Date Sent	

## **NOTES**

Any personal information collected on this form is protected under the Freedom of Information and Protection of Privacy Act. The information you provide will be used to update your OCAD University records. These records are only viewed by OCAD U administrative staff and not released to any other parties.

- 1. Allow 10 business days to process. May take up to 15 business days during the months of January, August and September. **Does not include mailing time.**
- 2. If you attended OCAD U before 1990, please be aware that your request may take 4-8 weeks to process.
- 3. Rush service is not available during the first two weeks and last two weeks of the fall and winter terms.
- 4. A transcript will not be issued if you have outstanding accounts at the University.
- 5. Fees are non-refundable.
- 6. Student records are confidential and transcripts are issued only upon written request from the student.

## OCAD University does not use a GPA system; averages are not printed on transcripts.

Transcripts are prepare	ed on OCAD University security paper a	and include:			
<ul><li> Grades</li><li> Academic standing (</li></ul>	e, title, credit weight for each course ie. probation, withdrawn etc)	<ul> <li>Degree awarded, program completed, minor completed and graduation date if applicable</li> <li>Official signature</li> <li>Official seal on envelope</li> </ul>			
METHOD OF PAYMENT	_				
○ Cheque	Total Amount				
<ul><li>American Express</li></ul>	rican Express Name on Credit Card				
○ Visa	Credit Card Number				
	Credit Card Expiry Date (MMYY)  The information provided above is true and	d does not contain any false or misleading facts.			
	the above amount for the payment of transcript(s) to my credit card.				
	Cardholder Signature				
OFFICE USE ONLY (TRA	NSCRIPTS)				
Date:	Student ID:	Student Name:			
Number of standard se	rvice (\$12 per transcript)	Number of rush service (\$24 per transcript)			
○ Fax (\$5)	Ocurier \$35 \$50 \$100				
Total Amount					

Last Updated: November 2018