

Degree Parchment Re-issue Order Form

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. 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 to facilitate the credit card charge over the phone before the order is processed.	will call you
Email:	
Method of Shipping Mail	
individual's responsibility to provide a complete and accurate mailing address when ordering parcha	nents.
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:	Page 2 of 3

Payment Information (only required if submitting request by mail) ease indicate if payment will be through Visa or Mastercard.
Visa
Mastercard
edit Card #: /
piry (mm/yy):/
/V #:
rd Holder's Name:
e card holder's signature is required on page 2.

Payment information will be destroyed upon successful payment process.