



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 \$28.25 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
- Pick Up
- Courier (Ontario): **\$15 fee**
- Courier (U.S.A): **\$35 fee**
- Courier (Canada): **\$30 fee**
- Courier (International): **\$40 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.