

## Date Received Office Use Only

## Official Transcript Request

The Registrar's Office 222 St. Patrick Street Toronto, ON M5T 1V4

regoffice@michener.ca | 1 (416) 596-3117 or 1 (800) 387-9066

Transcripts are produced on Tuesdays and Thursdays each week. Archival searches may be necessary and will require additional time to process. Student records are confidential, official transcripts are only issued when requested through written authorization by the student.

PERSONAL INFORMATION (PRINT CLEARLY)					
STUDENT ID		DATE OF BIRTH			
		-	/ / _ MONTH DAY	YEAR	
LAST NAME	PREVIOUS LAST NAME	FIRST NAME		MIDDLE NAME	
STREET ADDRESS		CITY/TOWN		PROVINCE	
POSTAL CODE COUNTRY		EMAIL ADDRESS		TELEPHONE	
TRANSCRIPT REQUEST OPTIONS					
A. Number of transcript copies required: (\$12 per copy)					
B. Program Name: Year: Term:					
C. Hold for final grades: N Y (If yes, transcript will not be printed/sent until final grades are available)					
D. Delivery Options (Select all that apply)					
Pick-up, Photo ID Required (During Registrar's Office in-person business hours)					
Email Address (ONLY REGULATORY BODIES OR INSTITUITIONS, CANNOT SEND TO STUDENT'S EMAILS)					
Email:					
Mail Delivery (Please note we cannot send to PO Boxes via Courier, Courier tracking is available upon request)					
Address Above Address Below					
Regular Mail Courier Canada \$10 Courier United States \$25 Courier International \$50					
ATTN STREET ADDRESS					
DEPT CITY/TO		1			
PROVINCE COUN'	TRY POSTAL CODE	<u> </u>			
PAYMENT DETAILS					
Number of Copies: x \$12.00 = \$	Courier Fee	es: \$	Total Amount: \$		
Payment Method					
Credit Card (Visa, AMEX, Mastercard)		Debit (In-person only)		Certified Cheque	
Cash (In-person only)	Mone	Money Order		Cheques are NOT	
accepted)  IF CREDIT CARD PAYMENT:					
/					
CREDIT CARD NUMBER EXPIRY DATE					
CARDHOLDER SIGNATURE		DHOLDER NAME (PLEASE PRINT)  DATE			
AUTHORIZATION AND DECLARATION: I certify that the information contained herein and in the supporting documents is true, correct, and complete.					
Student Signature: DATE:				ect, and complete.	

Notes: 1. The Registrar's Office cannot release high school documents and other records on file; they must be obtained from the issuing institution. 2. Official transcripts must be sent directly to another institution. 3. Transcripts will not be released to students who have financial holds on their records. The information on this form is collected under the authority of the Michener Institute of Education at UHN and will be protected and used in compliance with the Ontario Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31. Student information held by the Michener Institute of Education at UHN may be used for administrative and statistical purposes of the Institute and/or the ministries and agencies of the Government of Ontario and the Government of Canada.