ENROLMENT SERVICES			
THE PAS CAMPUS		**THOMPSON CAMPUS**	
P.O. Box 3000	Phone (204) 627 8500	55 UCN Drive	Phone (204) 677 6450
7th & Charlebois	Toll Free 1 866 627 8500	Thompson MB R8N 1L7	Toll Free 1 866 677 6450
The Pas MB R9A 1M7	Fax (204) 627 8514		Fax (204) 677 6416

OFFICIAL TRANSCRIPT/PARCHMENT REQUEST FORM (PLEASE PRINT)

Protection of Privacy: Personal information collected on this form will be utilized by the University College of the North for admission and registration purposes. It is collected under the general authority of the *Colleges and Universities and Consequential Ammendments* Act, and in conformity with the Manitoba *Freedom of Information and Protection of Privacy* Act.

FEE AND PAYMENT INFORMATION

- ⇨ $13.00 for each transcript; Diploma/certificate (Only 1 Allowed) $68.00; (plus GST) **Duplicate Mature High School Diploma not available.**
- ⇨ Official transcripts will not be released to students with a Financial Hold
- ⇨ Submit fee with transcript request. Cheque or money orders are payable to University College of the North. (Do not send cash in the mail)

1 In Person: Interac, cash, Visa, MasterCard and cheque or money order.

2 By Mail: Cheque or money order (cheques must clear prior to release of transcript) or by MasterCard or Visa authorization.

3 By Fax: MasterCard or Visa credit card authorization.

PERSONAL INFORMATION (Your student record will be updated as applicable)

Full Legal Name _____ (First / Middle / Last)

Student Number _____

Program Name _____

Former Name _____ (if applicable) (First / Middle / Last)

Calendar Year of Studies _____

Mailing Address _____ (PO Box/Street No. / City/Town / Province / Postal Code)

Birthdate _____ (Month / Day / Year)

Home Phone No. _____ Cell Phone No. _____ Email Address _____

TRANSCRIPT DISTRIBUTION (Within three business days)

☐ Mail official transcript to the address(es) below. Ensure contact person/title and complete institutional address is included.

☐ For pick-up _____
Date: Minimum two business days from request

☐ Transcript (per copy) ___ x 13.00 + GST = _____

☐ Parchment (1 Only) ___ x 68.00 + GST = _____

Total Fee (Enclose payment) $

Quantity	Name and complete mailing address	Quantity	Name and complete mailing address
☐		☐	

⇨ Attach additional sheet for mailing distribution if required

⇨ No one may pick up your transcript without your written consent

⇨ Transcripts are mailed regardless of INC (incomplete) or WIP (Work-In Progress) marks on the transcript

Signature _____ Date _____

Visa or MasterCard Number (Fax or mail-in only) _____ Expiry Date _____

Authorizing Signature _____

☐ Cheque ☐ Cash/Interac ☐ Money Order ☐ Credit Card

Receipt No. _____ Received by _____ Date _____

☐ Financial Hold on the account

ENROLMENT SERVICES: Document Uploaded _____ ESA Review _____

Form Date Revised August 2019