Application for Replacement Parchment

A parchment replacement fee must be paid at the time this application is submitted to the Registrar's Office in Student & Enrolment Services. Please contact the Student Accounts office at 780-479-9207 or studentaccts@concordia.ab.ca regarding the fee. Requests take 3-5 business days to process. Please allow sufficient time for processing.

TO BE COMPLETED BY THE STUDENT

Last Name	**First Name**	**Student ID Number**
Telephone	**Email**	
Degree	**Convocation Year**	

I am requesting a replacement parchment for the following reason:

□ I have changed my name. Attached is a *Change of Name Form*, official legal documentation in support of the name change, and my original parchment.

□ The original parchment has been misplaced, lost or stolen. I understand that the replacement parchment will indicate that it is a replacement.

□ Other

_____

_____

PLEASE SELECT THE METHOD OF DELIVERY

□ **I will pick up my replacement parchment at Student & Enrolment Services when it is ready.**
Please note that the person picking up the copy/copies **must present valid photo identification.**

□ **I have attached a Letter of Authorization which designates a third party (by complete legal name and birth date) to pick up the replacement parchment on my behalf.**
Please note that the person picking up the copy/copies **must present valid photo identification.**
Third party name:

□ **Please courier the replacement parchment to the address below. I have included the appropriate fee for courier confirmation of delivery.**

Recipient			
Address			
City	**Province**	**Postal Code**	**Country**

Student Signature **Date**

By signing this request, I understand that misrepresentation or attempts to obtain official documentation under false pretences are serious offences which may result in prosecution under the Criminal Code of Canada.

TO BE COMPLETED BY THE REGISTRAR'S OFFICE

Completed form received by the Registrar's Office	**Initials**	**Date**
Delivery method:	□ Pickup by student at Student & Enrolment Services □ Pickup by Designate □ Couriered to address given	**Date**