

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 Student Accounts at 780-479-9201 or studentaccounts@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/Diploma/Certificate	Convocation Year	
<p>I am requesting a replacement parchment for the following reason:</p> <p><input type="checkbox"/> I have changed my name. Attached is a <i>Change of Name Form</i>, official legal documentation in support of the name change, and my original parchment.</p> <p><input type="checkbox"/> The original parchment has been misplaced, lost or stolen. I understand that the replacement parchment will indicate that it is a replacement.</p> <p><input type="checkbox"/> Other</p> <p>_____</p> <p>_____</p>		

PLEASE SELECT THE METHOD OF DELIVERY			
<input type="checkbox"/> 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.			
<input type="checkbox"/> 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: _____			
<input type="checkbox"/> 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:	<input type="checkbox"/> Pickup by student at Student & Enrolment Services <input type="checkbox"/> Pickup by Designate <input type="checkbox"/> Couriered to address given	Date