



# Alumni Transcript Request Form

Please complete this fillable PDF and return by mail or in person to: Program and Records Office, 1012 Osgoode Hall Law School, York University, 4700 Keele Street, Toronto, ON M3J 1P3 OR Email to [student\\_services@osgoode.yorku.ca](mailto:student_services@osgoode.yorku.ca)

Please use a separate request form for each destination mailing address.

FEE: \$15 per copy. Courier charges may apply (see below).

NOTE: A transcript will NOT be issued if any University financial account is outstanding.

| STUDENT INFORMATION  |                                 |                          |
|--|---------------------------------|--------------------------|
| Student Number (if known)  | Last Name                       | Given Name               |
| Date of Birth  | Telephone                       | E-mail                   |
| If current student, check year of study<br>__ 1 <sup>st</sup> __ 2 <sup>nd</sup> __ 3 <sup>rd</sup> __ Special | Degree received<br>__ JD __ LLB | If graduated, what year? |
| Number of Transcripts Requested  | Total Cost                      |                          |
| Credit Card Number (MasterCard or VISA only)   |                                 | Expiry Date (MM/YY)      |

| WHEN DO YOU WANT YOUR TRANSCRIPT PRODUCED?   |  |
|--|--|
| <input type="checkbox"/> ISSUE IMMEDIATELY transcript(s) currently on record           | <input type="checkbox"/> HOLD until degree conferred: __ June __ October |
| <input type="checkbox"/> HOLD for all Fall term grades to be released (end of January) |  |
| <input type="checkbox"/> HOLD for all Winter term grades to be released (end of May)   | <input type="checkbox"/> SEAL _____ copies of my transcript              |

| ATTACHMENTS TO TRANSCRIPT   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Intensive Evaluation (ie: Parkdale, Criminal, Innocence, Aboriginal) | <input type="checkbox"/> Other _____ |

| SEND TRANSCRIPT(S) TO: |                                       |
|------------------------|---------------------------------------|
| Name/Dept              |                                       |
| Institution            |                                       |
| Street Address         |                                       |
| City                   | Prov                      Postal Code |

| Method of Delivery:                          |
|--|
| <input type="checkbox"/> Pickup              |
| <input type="checkbox"/> Standard Mail       |
| <input type="checkbox"/> Courier             |
| <input type="checkbox"/> Canada \$35         |
| <input type="checkbox"/> USA \$50            |
| <input type="checkbox"/> International \$100 |

Signature \_\_\_\_\_ Date \_\_\_\_\_

| For Office Use Only |   |                |           |
|---------------------|---|----------------|-----------|
| Paid By:            | <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cash | Date Received: | Initials: |
| Date Sent:          |   | Initials:      |           |

Privacy: Personal information in connection with these forms is collected under the authority of The York University Act, 1965 for educational, administrative and statistical purposes. The information will be used to process your enrolment and registration in academic programs; to record and track your academic progress; and for related recordkeeping purposes. If you have any questions about the collection of this information by York University, please contact: Programs and Records Manager, Osgoode Hall Law School, 1012 IKB, Osgoode Hall Law School of York University, 4700 Keele Street, Toronto, Ontario, M3J 1P3, 416-650-8182.