



ST. CLAIR

COLLEGE

REQUEST FOR TRANSCRIPT OF ACADEMIC RECORD

SOUTH, CAMPUS 2000 TALBOT Road West
Windsor, ON N9A 6S4
Tel: (519) 972-2759
Fax: (519) 972-3811
Web address: www.stclaircollege.ca

Name:

_____	_____
Last (Family) Name	Former Last Name
_____	_____
First Name	Middle Name
_____	_____
Date of Birth	Phone Number:

Address:

_____	_____	_____
Number	Street	Apt.
_____	_____	_____
City	Province	Postal

Student Number: _____

Number of Copies: _____

Limit **2 free** transcripts per academic year

PLEASE CHECK ONE:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Mail through
Canada Post
immediately | <input type="checkbox"/> Pick Up in person
at the Registration
Office with photo ID | <input type="checkbox"/> Graduation status
& final grades listed
& mail by Canada Post | <input type="checkbox"/> Process at the end of the
current semester
& mail by Canada Post |
|---|---|--|---|

Please send Official Transcript(s) to:

To the following address (Please Print)

OR

Above Address:

(Student must provide a complete and accurate address for mailing purposes)

Freedom of Information and Protection of Privacy Act:

St. Clair College adheres to the Freedom of Information and Protection of Privacy Act 2002, S.O. 2002, Chapter 8 Schedule F, Section 6. Student records are confidential and transcripts are issued only upon the request of the student. If you have past debt with the college, Official Transcripts cannot be issued until the debt is cleared. Request for Transcripts will be limited to two (2) free per academic year. Requests beyond the limit will incur a cost of \$10 per transcript. Please note that Graduation Status transcript requests can take up to 4 weeks from end of semester to process.

Student Signature: _____

Date: _____

OFFICE USE ONLY:

Posted: _____

Sent: _____