

ACADEMIC RECORD REQUEST FORM

The Office of Research and Professional Development, Faculty of Education
023 Winters College, 4700 Keele Street, Toronto, ON M3J 1P3
Tel: (416) 736-5003/Fax: (416) 736-5023
Email: raiseyouraq@edu.yorku.ca
Website: <http://www.raiseyouraq.ca/>

Use this form for Additional Qualifications completed after 1993 and all Principal's Qualification Programs. To request transcripts for Additional Qualifications completed up to and including 1993, please visit <http://www.registrar.yorku.ca/services/everything/transcripts/methods.htm>

PERSONAL INFORMATION (please print)

COLLEGE OF TEACHERS REGISTRATION NUMBER: (from your Certificate of Qualification)	<input type="text"/>	DATE OF BIRTH: (OCT requirement) (MM / DD / YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SURNAME:	PREVIOUS SURNAME: (if applicable)	FIRST NAME:					
STREET ADDRESS:						APT/UNIT:	
CITY:	PROVINCE:	POSTAL CODE:					
HOME TEL:	WORK TEL:	E-MAIL:					

COURSES TO INCLUDE IN ACADEMIC RECORD (list courses to appear on Academic Record)

Additional Qualifications	Year Completed (1994 to present)	Location Attended
Course 1:		
Course 2:		
Course 3:		
Course 4:		
Course 5:		

MAILING DETAILS

NOTE: All your AQ/ABQ Courses are listed on one transcript

Mail ____ (#) copies to my address above <input type="checkbox"/> Regular Mail <input type="checkbox"/> Courier	Mail ____ (#) copies to the Organization below <input type="checkbox"/> Regular Mail <input type="checkbox"/> Courier
Fax a copy to the Recipient/Organization below: Name of Recipient/Organization: _____ Fax #: _____	Name of Organization _____ Street Address _____ City _____ Province _____ Postal Code _____

PROCESSING AND PAYMENT INFORMATION

Processing Options:

TRANSCRIPT FEE: <input type="checkbox"/> \$15 - REGULAR MAIL (5-10 Business Days)	FAX COPY: <input type="checkbox"/> \$5 - ALL DESTINATIONS	COURIER OPTIONS (Charged in addition to the Transcript Fee): <input type="checkbox"/> Fee \$50 - \$35 Canadian Destination Courier \$15 Transcript Fee (2-3 Business Days)	<input type="checkbox"/> \$65 - \$50 U.S. Destination Courier Fee \$15 Transcript Fee	<input type="checkbox"/> \$115 - \$100 International Destination Courier Fee \$15 Transcript Fee
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Payment Option: (Please check one) VISA MASTER CARD CERTIFIED CHEQUE MONEY ORDER DEBIT (IN PERSON ONLY)

Credit Card Number:	Expiry Date: (MM / YY)
<input type="text"/>	<input type="text"/>

CARDHOLDER'S NAME: _____ **CARDHOLDER'S SIGNATURE:** _____
(Print clearly)

Payment Amount: \$ _____

IMPORTANT NOTES

- 1) Incomplete and unsigned requests will not be processed.
- 2) For recently completed AQ/ABQ/PQP courses, please allow 4-6 weeks for the course to be added to your OCT certificate. Transcripts will be processed after your OCT public registry has been updated.

APPLICANT'S SIGNATURE: _____ **DATE:** _____