

**Student Information**

PLEASE PRINT CLEARLY

**Family Name** \_\_\_\_\_ **Concordia ID Number** \_\_\_\_\_

**First Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
DAY MONTH YEAR

**Address** \_\_\_\_\_ **Telephone (Day)** \_\_\_\_\_  
STREET ADDRESS APT. AREA CODE/COUNTRY CODE

\_\_\_\_\_ **Telephone (Evening)** \_\_\_\_\_  
CITY PROVINCE AREA CODE/COUNTRY CODE

\_\_\_\_\_   
COUNTRY ZIP / POSTAL CODE

**E-mail** \_\_\_\_\_

**Degree Earned** \_\_\_\_\_

**Year** \_\_\_\_\_ **Spring** **Fall**

**Request Information**

Please select one:

**\$35 CDN** Express Post to CDN & US addresses (typically 2-5 business days) / Registered mail to international addresses (typically 3-12 weeks).

**\$60 CDN** Courier to North America / South America / Caribbean / Europe (typically 4-7 business days). This option is not available within Canada.

**\$85 CDN** Courier to Asia / Africa / Australia and Oceania (typically 4-7 business days)

*Note: Courier rates may be higher or unavailable for certain destinations. If applicable, we will contact you with the rate prior to processing your request.*

I would like \_\_\_\_\_ certified copies of my diploma. The fee is \$10 CDN per copy.

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

OFFICE USE ONLY	Mailed Name: _____ Payment Processed	Date: _____
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**Payment Information**

The total amount can be paid by credit card (VISA or MasterCard), provide the information below.

PLEASE PRINT CLEARLY

STUDENT ID #	STUDENT FAMILY NAME	STUDENT FIRST NAME
<p><b>Credit Card:</b>      <b>Visa</b>                  <b>Mastercard</b></p>		
<p>Express Post (CAN &amp; US) / Registered (Int'l) \$35      \$ _____</p>		
<p>PLEASE NOTE:                      OR Courier to North America / South America / Caribbean / Europe We do not accept Visa or                      (not available for CAN) \$60      \$ _____ Mastercard Debit.</p>		
<p>OR Courier to Asia / Africa / Australia and Oceania \$85      \$ _____</p>		
<p>Certified Copies (\$10 each)      \$ _____</p>		
<p style="text-align: right;">Total Amount:      \$ _____</p>		
<p><b>Credit Card Number:</b> _____ - _____ - _____ - _____</p>		
<p><b>Expiry Date:</b>      _____ - _____                                         MONTH                  YEAR</p>		
<p><b>Phone:</b> ( _____ ) _____</p>		
<p><b>PLEASE SIGN – Cardholder’s Signature:</b></p>		

**Notes:**

- *Payment will not be processed without a signature and total amount indicated.*
- *We do not accept cheques, money orders or bank drafts.*
- *Concordia University will not be responsible for additional costs associated with diplomas returned as unclaimed or with incomplete/incorrect mailing addresses.*

To send the completed form via e-mail (with credit card payment):  
convocation@concordia.ca

To send the completed form via fax (with credit card payment):  
514-848-2837 Attention – Events Office

To send the completed form via mail (with credit card payment):  
Concordia University Enrolment Services: Attention – Events Office  
1455 De Maisonneuve Blvd. West, FB-900  
Montreal, Quebec H3G 1M8