

DOCUMENT REQUEST FORM

DOCOMENT REQUEST FORM					
Surname		Given Name			
Student Number		Date of birth			
Telephone		Email			
Special instructions:					
Please specify the num	ber of copies as well as your language pi	reference for your document	t(s):		
Document type				Number of copies	Preferred language (E/F)
Certificate Request (\$40.00) This is NOT a request to graduate					
Confirmation of enrollment (\$16.00)					
This letter is for immigration purposes.					
GPA conversion letter (\$22.00)					
Letter of eligibility to gradu	uate (\$19.00)				
	npletion letter for the Post-Graduation Work Per your courses or after you have successfully defe				
Letter of eligibility to gradu	ate or completion International Students				
Letter of courses over-and-above degree requirements (\$16.00)					
Letter of intent to return to full-time studies (\$22.00)					
Other (please specify):					
Delivery method			l		
Pick-up	Pick-up Mail (please indicate mailing a instructions section if required			address in the	special
Priority post r	Priority post mail - Ontario & Québec (\$8.00) Priority post mail - Canada 8			other (\$19.00)	
Express international (\$57.00) Email address					
· · · · · · · · · · · · · · · · · · ·	days to process this request. This does r Illy on our website and via LUNET (for sta	-	ease note that y	you can now or	der your

Student signature: _____ Date: ____