



CREDENTIAL REPLACEMENT REQUEST FORM

UNDER THE FREEDOM OF INFORMATION ACT, THIS FORM MUST BE COMPLETED AND SIGNED IN ORDER TO RELEASE/FORWARD ACADEMIC INFORMATION

- Valid Photo ID is required for In-Person requests and pick up (Student Card/Driver's License/Passport)
- Multiple copies of credentials will not be produced
- Allow 3 weeks for processing
- Fee for Replacement is \$40.00 CDN

Student Number _____ SIN _____ Date of Birth _____

Surname _____ First Name _____

Previous Surname (if applicable) _____

Address _____ Apt# _____

City _____ Province _____ Postal Code _____

Phone Number(s) _____ Email Address _____

Program Attended _____ From _____ to _____
Mm/dd/yy Mm/dd/yy

- REPLACEMENT DIPLOMA**
- REPLACEMENT CERTIFICATE**
- REPLACEMENT DEGREE**

Reason for Replacement:

- Incorrect information (returning original)**
- Lost/misplaced**
- Damaged (returning original)**
- Other – please specify**

I certify that the above information is true and complete

Signature

Date

SUBMIT COMPLETED FORM (including payment) TO:

BY Mail: George Brown College Attn: Academic Records
P.O. Box 1015 Station B, Toronto, ON M5T 2T9

BY Fax: 416-415-4289
Contact #: 416-415-5000 ext. 4485

Please indicate method of payment (no personal cheques)

___ Certified Cheque ___ Money Order ___ VISA ___ MASTERCARD ___ AMEX

Credit Card # _____	Expiry Date _____	
Cardholder's Name (if different from above) _____		
_____ Signature of Cardholder	\$ _____ Amount Authorized	_____ Date

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The personal information on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002. The information is used for the administrative and statistical purposes of the College including but not limited to, Admissions, Registration and maintaining records, as well as Awards and Scholarships; Alumni and College Foundation administrative functions and/or the Ministries or Agencies of the Government of Ontario and the Government of Canada. This information is being collected under section 39 (2) and section 42 of the Freedom of Information and Privacy Act of Ontario. If you have any questions or concerns related to Freedom of Information and Privacy please contact the FOI Coordinator for the College at 416-415-5000 ext.4646.