

Parchment Replacement Form

The parchment will be mailed out in a cardboard envelope to the address listed below after the form and payment have been received.

Note: The replacement diploma is produced with the current style and with the signatures of the officials currently in office. The parchment will be issued with a replacement note on the reverse side.

There is a fee of \$50 for a replacement parchment.

GENERAL INFORMATION

Last Name		First Name		Middle Name	
Previous Names (if applicable)			U of S Student Number (if known)		
Specify Type of Degree, Diploma or Certificate <small>If Arts & Science, please indicate B.A. or B.Sc., 3-year, 4-year, honours or certificate.</small>		College		Date of Graduation <input type="checkbox"/> Spring Year <input type="checkbox"/> Fall	
Reason for replacement <input type="checkbox"/> Lost <input type="checkbox"/> Destroyed <input type="checkbox"/> Damaged <input type="checkbox"/> Name Change* <input type="checkbox"/> Other _____					
<small>*Legal documentation is required for all name changes. A copy of a driver's license or marriage certificate is acceptable.</small>					

PLEASE NOTE

- Payment must accompany this request. Please make cheques payable to the University of Saskatchewan.
- Parchments will be held until all outstanding accounts with the University of Saskatchewan are cleared.
- Allow **two weeks** for parchment production.
- Original parchments **must be returned** if damaged or name change required.
- The University of Saskatchewan will not be held responsible for meeting deadlines or ensuring delivery.
- Parchments will not be released to a third party without the written authorization and signature of the student.
- Photo identification is required to pick up parchments.

METHOD OF PAYMENT

Cheque Money Order Certified Cheque MasterCard VISA Other _____

Name on Credit Card		MasterCard/Visa Number	
Expiry Date (mm/yy)	Card Holder's Signature		

DELIVERY INSTRUCTIONS

- I will pick up my parchment I authorize _____ to pick up my parchment
- Deliver my parchment to the following address:

Last Name		First Name			
Address		City		Province	Country
Postal Code		Tel			
Email		Delivery Method <input type="checkbox"/> Regular Mail <input type="checkbox"/> Courier			
Courier Rates (Courier delivery requires a street address and telephone number. They will not deliver to a box number.) • Within Canada \$17 • Within USA \$30 • International \$45					

STUDENT AUTHORIZATION

I hereby authorize Academic Services & Financial Assistance to reprint and release my parchment.

Student Signature	Date
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FOR OFFICE USE ONLY

<input type="checkbox"/> Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Certified Cheque
<input type="checkbox"/> Credit Card	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Regular Mail	<input type="checkbox"/> Courier	\$ _____
Total Paid		\$ _____
<input type="checkbox"/> Original diploma returned		
Date Processed _____	Staff Initial _____	

RETURN THIS FORM TO: (If mailing, please use the complete address as it appears below)