



REPLACEMENT/DUPLICATE DEGREE PARCHMENT REQUESTS

REGULATIONS

1. The degree parchment is a legal document that will be reissued only upon written request of the student. (In the case of a deceased student, a written request may be submitted only by the legal representative of the student's estate.)
2. In the case of degree replacement due to name change, the student's name must be updated with Financial & Registration Services before the replacement will be issued. (Contact finreg@brandonu.ca or 204-727-9724 for details.)
3. Replacement/duplicate degrees will have "Replacement/Duplicate Degree Issued: mm/dd/yyyy" printed in the bottom right-hand corner.
4. Replacement/duplicate degrees will be printed using the degree template that is active and signed by the officials who are in office at the time that the replacement/duplicate request is made.
5. All financial holds on the student's account must be cleared before replacement/duplicate degree requests will be processed.
6. Allow 2-4 weeks for processing. Requests submitted during the months of April and May may be delayed due to preparations for Convocation.

PROCEDURE

1. Complete, sign, and date the attached form.
2. Submit the form, along with payment, to the following office:

Senate Office - Brandon University
270 18th Street
Brandon, MB R7A 6A9
Fax: 204-727-4072
E-mail: senate@brandonu.ca

NOTE: For your security, do not send credit card payment information by fax or e-mail. Credit card payments for fax and e-mail requests may be provided by phone at 204-727-9724.

3. You will be required to show government-issued photo identification if picking up your replacement/duplicate degree in person. In case you have authorized on the request form a third-party to pick up your degree, that person will be required to show government-issued photo identification.
4. Documents not picked up within three months from the date of request will be destroyed.



REPLACEMENT DEGREE / CERTIFIED DEGREE COPY REQUEST FORM

PERSONAL INFORMATION

Student #:	Degree:	Year Graduated:
Last Name:		
First Name:		
Street Address:		Apartment:
City:	Prov./State:	Country:
		Postal/Zip Code:
E-mail:		Phone #:

REQUEST DETAILS

Number of replacement/duplicate parchments requested:

DELIVERY INFORMATION

<input type="checkbox"/> Pick-up myself <input type="checkbox"/> Pick-up by person authorized by me: _____ <small>(First & last name of person authorized for pick-up)</small>	<input type="checkbox"/> Mail to above address <input type="checkbox"/> Mail to address below: Attention: _____ Street Address: _____ City: _____ Prov./State: _____ Country: _____ Postal/Zip Code: _____
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STUDENT SIGNATURE

By signing below, I authorize release of documents as indicated above. I understand that misrepresentation or attempts to obtain official documentation under false pretenses are serious offences that may result in prosecution under the Criminal Code of Canada. Student Signature: _____ Date (mm/dd/yyyy): _____	FOR OFFICE USE Request Received: Request Processed: Initials:
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PAYMENT INFORMATION

<input type="checkbox"/> Replacement/Duplicate Degree (\$50 CDN/copy)	Number of copies: _____	G/L Code: 5503-510
		TOTAL:
<input type="checkbox"/> Cheque enclosed	<input type="checkbox"/> VISA Card Number: _____ Cardholder Name: _____ Cardholder Signature: _____	<input type="checkbox"/> Mastercard <input type="checkbox"/> AMEX Expiry: _____