

# Application to Graduate

The information you provide on this form is required to process your final student achievement and Document of Recognition. This form should only be completed by students who are taking their final course(s) in a program. Students must be enrolled in a program to be eligible to graduate.

Graduation/Alumni Fee: \$48.00. This per program fee provides for all services related to graduation, convocation and the Alumni Association. This is not a taxable item.

Please print and complete all information. Once completed, please send to: The Registrar's Office, 299 Doon Valley Drive, Kitchener, Ontario, N2G 4M4. Fax: 519-895-1097.

OEN Number (if known): \_\_\_\_\_ Student Number: \_\_\_\_\_

Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Previous Last Name: \_\_\_\_\_ Birthdate (Y/M/D): \_\_\_\_\_

Address:

Apt. Number: \_\_\_\_\_ Street Number and Name: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Alternate Telephone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Program: \_\_\_\_\_

Expected Date of Completion: \_\_\_\_\_

## Method of Payment

(Without payment, this application will not be processed. Cheques are not accepted.)

VISA

MasterCard

American Express

Credit Card Information (Credit card will not be billed until registration accepted):

Credit Card Number: \_\_\_\_\_ Credit Card Expiry Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Cardholder's Name: Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Freedom of Information: The personal information collected on this form is used for administrative purposes of the Registrar's Office under the authority of the Ontario Colleges of Applied Arts and Technology Act, R.S.O. 2002, and regulations thereunder. Personal information will be protected in accordance with the Freedom of Information and Protection of Privacy Act. (FIPPA)