



www.ocadu.ca
Office of the Registrar
100 McCaul Street, Toronto, Ontario Canada M5T 1W1
TELEPHONE 416.977.6000 FAX 416.977.4201
EMAIL: Regservices@ocadu.ca

Request for Confirmation of Graduation Letter

Student Information (Please Print)

Last Name		First Name		OCAD U Student Number	
Former Surnames (if applicable)				Birthdate (YYMMDD)	
Current Mailing Address					
Street #	Street Name		Apt/ Unit#	City	
Province		Postal Code		Country	
Home Phone Number		Alternate Phone Number		Personal Email Address	
I declare that I am the individual named above and that this is my signature. I authorize OCAD University to release the information requested below.					
Student Signature				Date	
Standard letters - \$12.00 (CAD) per copy: <input type="radio"/> confirmation of diploma/degree awarded <input type="radio"/> confirmation of eligibility to graduate (you have completed all graduation requirements and have applied to graduate)			Customized letters - \$24.00 (CAD) per copy: <input type="radio"/> courses completed outside of program requirements <input type="radio"/> other (specify details of your request below): _____ _____ _____		
Number of Copies Requested: ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ _____					
<input type="radio"/> I will pick up my letter(s)		<input type="radio"/> I authorize _____ to pick up my letter(s).			
Mail to: <input type="radio"/> Regular Mail (no additional charge)		<input type="radio"/> Courier (Canada \$35/ United States \$50/ International \$100) Recipient phone number required:			
Name					
Street #	Street Name			Apt/ Unit#	
City		Province			
Postal Code		Country			
<input type="radio"/> Fax (additional \$5.00 per fax) Recipient Name: _____ Fax Number (including area code): _____					
OFFICE USE ONLY					
Received By	Date Received	Fees Owng/Library	Date Completed	Student Notified: Emailed/Phoned	Date Sent

NOTES

Any personal information collected on this form is protected under the Freedom of Information and Protection of Privacy Act. The information you provide will be used to update your OCAD University records. These records are only viewed by OCAD U administrative staff and not released to any other parties.

1. Allow 10 business days to process.
2. A letter will not be issued if you have outstanding accounts at the University.
3. Fees are non-refundable.
4. Student records are confidential and letters are issued only upon written request from the student.

All proof of graduation letters are prepared on OCAD University letterhead and include:

- Student name
- Program of Study
- Diploma/degree awarded (minors if applicable)
- Date graduated
- Official signature and seal

METHOD OF PAYMENT:

☐ Cheque

Total Amount

☐ American Express

Name on Credit Card

☐ MasterCard

☐ Visa

Credit Card Number

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Credit Card Expiry Date (MMYY)

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The information provided above is true and does not contain any false or misleading facts.

☐ I authorize OCAD University to charge the above amount for the payment of letters to my credit card.

Cardholder Signature

OFFICE USE ONLY (LETTERS)

Date: _____ Student ID: _____ Student Name: _____

Number of standard letters (\$12 per letter) _____ Number of customized letters (\$24 per letter) _____

☐ Fax (\$5)

☐ Courier \$35 \$50 \$100

Total Amount _____