

ACADEMIC RECORDS REQUEST

Use this form to help you obtain official academic records/transcript(s) from your senior secondary (high school) or higher education (post-secondary) institution(s) to support your application. Your record(s) **must** be received in an envelope **sealed by the sending institution(s)**, including a signature/stamp across the back flap of the envelope(s) (see MacEwan.ca/Admissions > *Transcripts & Documents* > *From outside of Canada*).

Last/Family Name:	First/Given Name:	MacEwan ID Number:
Previous Name (if applicable):		Date of Birth:
Institution Attended:	Country:	Dates Attended: From _____ To _____ (month/year) (month/year)
Credential Name (if awarded):	Year of Award (if applicable):	Program(s) studied:
Student ID/Roll Number at Institution:	Length of Program:	

With my signature below, I hereby authorize the release of my academic records (official transcripts) to MacEwan University.

Applicant Signature	Date

Sending Institution

For authorized officials (registrar's office staff, for example): The person above requests that their academic record(s) (transcript, credential award and the like) be released to the Office of the University Registrar at MacEwan University. The record(s) should show: all subjects attempted/completed courses, including credits/units and all grades/marks awarded for all years of study and **must** be received in an envelope **sealed by the sending institution**, including a signature/stamp across the back flap of the envelope(s).

Institution Name:	Institution Former Name (if applicable):
Credential Awarded (if applicable):	Date awarded (month/year):
Name of Official Completing Form (please print/type):	Title:
Telephone (including country code):	Direct email:
Authorized Signature and Seal	Date

Please return this form and academic records to the address listed below:

Courier Address:

MacEwan University, Office of the University Registrar Building 7, 10700 – 104 Avenue NW Edmonton, Alberta
T5J 4S2 Canada
Phone: (Country Code: 1) 780-497-5000