



**CANADIAN BUSINESS COLLEGE**  
**Transcript Request Form**

UNDER THE FREEDOM OF INFORMATION ACT, THIS FORM MUST BE COMPLETED AND SIGNED IN ORDER TO  
RELEASE/FORWAR ACADEMIC INFORMATION

**Valid Photo ID is required for In-Person request and pick-up (Student Card / Driver's License /Passport)**

Student Number	SIN Number	Date of Birth	
Surname	First Name		
Previous Surname (if applicable)			
Address			Apt.#
City	Province	Postal Code	
Phone Number(s)	Email Address		
Program Attended	From	To	
	(mm/dd/yy)	(mm/dd/yy)	

- Send transcript now
- Send transcript after Graduation

**PAYMENT:**

Payable to Canadian Business College at 2 Bloor St. West 22<sup>nd</sup> Floor ,Toronto ,ON M4W 3E2

- Cash  Certified Cheque  Money Order  Visa  MasterCard  American Express

Credit Card #	Expiry Date
Cardholder's Name (if different from above)	
Signature of Cardholder	Amount Authorized
	Date

- Please mail my transcript to the address above
- I wish to Pick up my transcript in person

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**  
The personal information on this form is collected under the legal authority of the Ontario College of Applied Arts and Technology Act, 2002. The information is used for the administrative and statistical purposes of the College including but limited to, Admissions, Registration and maintaining records, as well as Awards and Scholarships; Alumni and College Foundation administrative functions and/or the Ministries or Agencies of the Government of Ontario and the Government of Canada. This information is being collected under section 39 (2) and section 42 of the Freedom of Information and Privacy Act of Ontario. If you have any question or concerns related to Freedom of Information and Privacy please contact the FOI Coordinator for the College at 416-415-5000 ext. 4646

**NORMAL PROCESSING:** 2 to 4 weeks, \$10.00 CAD / Copy

**PRIORITY PROCESSING:** Same day, \$20.00 CAD / Copy



**Canadian Business College**

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