



# PORTAGE COLLEGE

Box 417 Lac La Biche, AB T0A 2C0  
Telephone: 1-866-623-5551

You must download this file to your desktop before filling it out.

## DOCUMENT REQUEST

SUBMIT: In person; bring this completed form to a campus location,  
email: info@portagecollege.ca or Fax: 780-623-5519.

Student ID: \_\_\_\_\_ Name: \_\_\_\_\_

Alumni

Program/Campus: \_\_\_\_\_ Year Attended: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Maiden name (if applicable): \_\_\_\_\_ Any other name used while in college: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

\_\_\_\_\_ Fax Number: \_\_\_\_\_

\*\*\*\*Student Signature: \_\_\_\_\_ Date Requested: \_\_\_\_\_

### Documents Requested:

\*\*Certificate Number of copies: \_\_\_\_\_

\*\*Diploma Number of copies: \_\_\_\_\_

\*\*Financial Receipts (archived)

Student ID Reprint

Meal Card Replacement

**Please note: There is a \$10.00 fee for each of the above requests.**

T2202A (reprint) Year(s): \_\_\_\_\_

T4A (reprint) Year(s): \_\_\_\_\_

Transcript Number of **\*OFFICIAL\*** copies: \_\_\_\_\_

Number of copies (unofficial) \_\_\_\_\_

**Please note: There is a \$10.00 fee for each \*OFFICIAL\* transcript requested if you are not an alumni. Official transcripts will not be released until payment is received.**

**If you require transcripts at the end of term you will need to fill out a new document request form once you have completed your semester.**

**\*\*If you have an outstanding balance on your account, we are unable to process your request.\*\***

### PAYMENT METHOD

Cash/Debit (In Person)  Cheque/Money Order  VISA  MasterCard Online Bill Payment

**\*If paying by credit card, please call Student Accounts at (780) 623-5706 to release your card information.**

#### For Student Accounts Use Only

Date Paid \_\_\_\_\_

Amount Paid \_\_\_\_\_

Receipt # \_\_\_\_\_

Notes:

Transaction No.

**Mail document(s)** (must provide **complete mailing address**)

**Pick Up document(s)** (documents will only be held for **48 hours**, if not picked up they will be mailed)

Attention - Name \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Attention - Name \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address \_\_\_\_\_

Attention - Name \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address \_\_\_\_\_

Date Request Received \_\_\_\_\_ Date Document(s) Sent \_\_\_\_\_

Initialed by (staff) \_\_\_\_\_  
(Doc. Req/March 2024)

Initialed by (staff) \_\_\_\_\_