



Request for a Juris Doctor (JD) Diploma for Bachelor of Laws (LLB) Alumni

This form will not be processed if there are outstanding debts on your University account. **Mailed request forms and cheques cannot be accepted.** Please **fax** your request form to one of the numbers below and include a credit card number:

- 416-650-8409 if you graduated in or before 1993 **or**
- 416-650-8466 if you graduated in or after 1994.

Student Information (please print)

Student Number	Last Name/Family Name	Given Name(s)
Date of Birth (dd/mm/yy)	Telephone	E-mail

Student's Signature	Date (dd/mm/yy)
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Degree Information

Number of Copies _____ x\$80	Graduation (mm/yy)
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Pick-Up/Delivery and Payment Information

<input type="checkbox"/> I will pick up my diploma(s) <input type="checkbox"/> Please deliver to this address	Street Name and Number	City	
	Province/State	Postal Code/ZIP Code	Country
Credit Card Number (MasterCard or VISA only)	Expiry Date (mm/yy)	Cardholder's Signature	

Note 1: All orders must be pre-paid. Please note that the Registrar's Office does not accept personal cheques or money orders.

Note 2: Charges for mailing diplomas are as follows: \$35 in Canada, \$50 in the United States and \$100 International.

Office Use Only			
Fee Received by _____	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	
Amount Received _____	Date _____	Staff Initials _____	

NAME CHANGE

Fill out this section **ONLY** if you have changed your name and want to have it on your diploma. A request for a name change must be supported by the required documentation. For more information visit yorku.ca/mygrad/jd

Student Information (please print)

Given Name(s) on documentation	Given Name(s) currently on file
Last Name/Family Name on documentation	Last Name/Family Name currently on file

Student's Signature	Date (dd/mm/yy)
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Office Use Only			
Checked	<input type="checkbox"/> Name on SIS	<input type="checkbox"/> Faculty	<input type="checkbox"/> Doc. Rec'd
		Date _____	Staff Initials _____

Protection of Privacy: Personal information in connection with this form is collected under the authority of *Freedom of Information and Protection of Privacy Act* and *The York University Act, 1965* for educational, administrative and statistical purposes. The information will be used to process your enrolment and registration in academic programs; to record and track your academic progress; and for related record-keeping purposes. If you have any questions about the collection, use or disclosure of this information by York University, please contact the Manager, Student Client Services, W120 Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto ON, M3J 1P3, 416-872-9675.