

Credential Reprint Request Form

You can visit myPass.alberta.ca, the Alberta Education secure self-service website to request for Credential Reprint.

If you don't have online access, please complete the request for credential reprint form on the next page and mail to Alberta Education.

To avoid delays, please PRINT clearly when filling out the form.

- **Name:** If your surname (last name) has changed since you were in an Alberta high school, please complete the 'Previous Names' section on the form. To officially change the name on your transcript, please complete the 'Personal Information Change' form available at our website:

<http://www.education.alberta.ca/students/transcripts/forms/>

Request for Credential Reprint

The personal information as defined in the **Freedom of Information and Protection of Privacy Act** (FOIPP Act) that is collected on this form is collected pursuant to section 33(c) of the FOIPP Act. The purpose of this collection is to enable Alberta Education to update or correct student personal information and address in accordance to the information provided. Any collection of this information may be directed to Transcripts Office, Alberta Education, 44 Capital Blvd, 10044-108 St. NW, Edmonton, Alberta, T5J 5E6. Email: TAD@gov.ab.ca

Student Personal Information (Please PRINT)

Surname (Last Name)		First Name		Middle Name(s)
Previous Names (if applicable)			Date of Birth (yyyy/mm/dd)	
Alberta Student Number	Phone Number		Email Address	
Current Mailing Address				
City/Town	Province		Postal Code	

The following information is REQUIRED for verification purpose

Name of last Alberta High School attended		City/Town
Last Year Attended	Last Grade Attended	

Language of document: English French

Student Authorization

I authorize Alberta Education to collect and update my address and personal information contained on this form in accordance with the instructions I have provided. I understand this request will be processed only if signed by myself (student) or an authorized person.

Student's Signature	Date
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If student is over 18, the person requesting on the student's behalf must provide proof of identification (parent, guardian or legal representative) and a copy of a power of attorney or a letter of authorization signed by the student.

Name	Relationship	
Signature	Date	Phone Number

Submit Signed and Completed Form to:

Alberta Education
44 Capital Boulevard
10044-108 Street NW
Edmonton, Alberta T5J 5E6

Phone: 780 427-5736
Toll free : 310-0000 (outside Edmonton within Alberta)
E-mail: TAD@gov.ab.ca

For Office Use Only

<input type="checkbox"/> Driver's License	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Passport	<input type="checkbox"/> Vital Statistics	<input type="checkbox"/> Other
Initials		Date		