

Canada

## **Academic Records Request Form**

- **A. For Applicants:** This form is provided to facilitate the release of your academic records by your academic institution. You are responsible for contacting your academic institution directly.
  - 1) Complete the top part of this form. You must include your WES reference number.
  - 2) Submit this form to the registrar/controller of examinations or other authorized official where you obtained your credential(s).
  - 3) Print additional copies of this form as necessary.

WES Reference No. (required)		
ast/Family Name	First/Given Name	
Previous Name (if applicable)	Date of Birth (dd/mm/yyyy)	E-mail
nstitution Name	Country	Dates Attended
		From To (mm/yyyy) (mm/yyyyy)
Degree Name (if applicable)	Year of Award (if applicable)	(mm/yyyy) (mm/yyyy)  Major
Student ID or Roll Number at sending institution (if applicable)		
	and to Would Education St	un de co
nereby authorize the release of my academic re-		Date:
phodit 3 digitatare.		
nstitution Name:		
Degree obtained: (if applicable)	Date awar	ded: (month/yr)
	Date awar	rded: (month/yr)
Name of Official Completing Form: (please print or type)		ded: (month/yr)
Name of Official Completing Form: (please print or type)  Felephone:	Title:	
Name of Official Completing Form: (please print or type)	Title:	
Name of Official Completing Form: (please print or type)  Felephone:  uthorized signature and seal:  Yes. The applicant's academic records are att	Title:  Email:  ached to this form.	Date:
Degree obtained: (if applicable)  Name of Official Completing Form: (please print or type)  Telephone:  uthorized signature and seal:  Yes. The applicant's academic records are att lease send this form and academic records dires.  By Postal Mail:	Title:  Email:  ached to this form.	Date:
Name of Official Completing Form: (please print or type)  Telephone:  uthorized signature and seal:  Yes. The applicant's academic records are attelease send this form and academic records directly by Postal Mail:	ached to this form. ectly to WES using one of the	Date:e addresses below:
Name of Official Completing Form: (please print or type)  Telephone:  uthorized signature and seal:  Yes. The applicant's academic records are attelease send this form and academic records dire	ached to this form.  ectly to WES using one of the By Express  WES Reference WES Global	Date:e addresses below:

Canada



# **Document Submission Checklist**

Please use this checklist as a guide to ensure that the documents meet WES requirements. Documents not received as specified will delay your credential evaluation.

#### Remember to:

- Carefully follow the **document requirements** for your country of education.
- Use the Academic Records Request Form (optional).

### **BEFORE Sending Your Documents:**

HEN Sending Your Documents:	
☐ Make sure that all documents that are sent to WES are clear and legible.	
☐ Make sure that academic records include the correct spelling of your name. The WES evaluable will indicate the name and date of birth shown on your academic records.	ıatior
☐ Make sure that your transcripts are complete. Transcripts must show: all subjects taken, g received for each subject, and for each year you were in the program.	rades

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□ Make sure that your transcripts are placed in an envelope that is signed and sealed across the back flap by the institution preparing the documents.	
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	back flap by the institution preparing the documents.

☐ Send only academic records issued by recognized academic institutions. WES does not evaluate occupational or trade qualifications.

#### **Please Do NOT Send:**

- Personal photocopies of transcripts.
- Original documents.
- Documentation regarding non-formal training or work experience.

☐ Make sure that your WES reference number is indicated on all envelopes.