

Continuing Education and Extension

Credit-Free Programs: -Extension Certificate (Part-Time) 4825 Mount Royal Gate SW, Calgary AB T3E 6K6 T: 403.440.6875 F: 403.440.6670 E: conted@mtroyal.ca -Certificate (Full-Time) W: www.mtroyal.ca/conted -Diploma (Full-Time) Student ID number (enter 9 digits without space/dashes) Last Name/Family Name (Legal*) Middle Name (Legal) First Name (Legal) Legal Name: This is the name which will be inscribed on your parchment. If this is not the name under which you registered at Mount Royal University, you must provide evidence of your legal name (for example, a copy of your birth certificate, marriage certificate or legal name change.) Mailing Address (Street/PO Box #) Date of Birth DD ммм ΥΥΥ City/Town Province/Country Postal Code Business/Cell Telephone **Home Telephone Email Address** Fax Number (if applicable / (enter 10 digits) (enter 10 digits) enter 10 digits) NOTE: Phone/fax # boxes are pre-formatted. Do not enter spaces, brackets, dashes or other symbols when entering numbers. Enter 10 digits only. **Program Name** Date of Program Completion Unofficial Transcripts are available through Mount Royal University Student Web Services, MyMRU.ca Student Signature Date Office Use Only Graduation Term Graduation Date **Program Code Program Hours** SHADEGR SHADEGR 'Graduation/Graduation Date' Learner/ 'Degree Completion Term' & Graduation/'Graduation Term' Program Coordinator Signature Date

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