

**Comparative Education Service (CES)**

SCHOOL OF CONTINUING STUDIES

**REQUEST DUPLICATE ELECTRONIC COPY EDUCATIONAL CREDENTIAL ASSESSMENT/SEND TO A THIRD PARTY**

Complete this form to have electronic copy of Educational Credential Assessment (ECA) report/letter sent either to yourself or directly to a third party. CES ECA reports issued after 1997 are available in most cases. Those issued prior to 1997 are no longer available.

**APPLICANT INFORMATION**

<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Ms.	Student No: X _____
Family Name/Surname (exactly as shown on your identification)		First/Given Name	
Middle Name	Former/Maiden Name	Date of Birth (MM/DD/YYYY)	

**APPLICANT ADDRESS**

Apt/Unit, Street Number, and Street	
City/Town	Province
Country	Postal Code/Zip Code
Email	Phone Number

**IMPORTANT:** We communicate primarily by email. To ensure confidentiality, please provide an email address used exclusively by yourself. Please provide a photocopy of both sides of government-issued photo identification showing date of birth to identify you as the rightful owner of the documents.

**INFORMED APPLICANT'S AGREEMENT AND CONSENT:** I hereby request that CES issue electronic copy(ies) of my Educational Credential Assessment (ECA) report/letter as specified to be sent to me or sent to a third party, as per the instructions on this application.

I will notify CES in writing of any change to my personal information. I acknowledge that my date of birth (DOB) might appear for identification purposes on my Official Transcript.

I hereby release the University of Toronto, its agents, and any person or entity that provides information in accordance with this consent, from any and all actions, claims and demands for damages, loss, expense or injury, howsoever arising, which may hereafter be sustained by me as a result of the provision, collection, use or disclosure of information as set out above.

**IMPORTANT: This application form must be signed by the person whose name appears on the Transcript.**

Applicant Name (please print): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The University of Toronto respects your privacy. Personal information you provide to the University is collected pursuant to section 2(14) of the University of Toronto Act, 1971. The information you provide on this form will be used in assessing your request. At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions about privacy measures, please contact [scs.privacy@utoronto.ca](mailto:scs.privacy@utoronto.ca).*

## REQUEST DUPLICATE ELECTRONIC COPY EDUCATIONAL CREDENTIAL ASSESSMENT/SEND TO A THIRD PARTY

### SERVICE AND PAYMENT OPTIONS

**Full payment must accompany this application form.**

Please note that all fees are **final and non-refundable**, and subject to change without notice. CES accepts credit cards only; personal cheques, bank drafts, debit cards, and cash are NOT accepted.

- If you are submitting this form by **mail** or **fax**, please fill out the credit card information below.
- If you are submitting this form **electronically**, please do not include your payment information; we invite you to contact us by phone to process your payment.

<b>ELECTRONIC COPY OF ECA REPORT per copy</b>	<b>\$32.77 (\$29 + 13% HST)</b>	<b>Copies required: _____</b>
Date of the Original Assessment Report (MM/DD/YYYY):		

<b>Electronic copy of ECA Report to the following email address:</b>	
Address 1:	
Name of Organization/Person:	
Email	
Address 2:	
Name of Organization/Person:	
Email	
Address 3:	
Name of Organization/Person:	
Email	

To have more electronic copies of your assessment sent to different email addresses, please complete a separate form for each request

### PAYMENT METHODS

<input type="checkbox"/> American Express	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Credit Card Number	Name of Card Holder	
Expiry Date (MM/YY)	Credit Card Security Code* (CSC/CCV)	Total Fee (Canadian \$)

\*The Credit Card Security Code (CSC or CCV) is a number printed on your credit card (not on your receipts or statements) for additional security. For Visa and MasterCard it is a 3-digit number printed in the signature field on the back of your credit card; for American Express it is a 4-digit number appearing on the front.

If the card holder is different from the applicant, please complete the following:

I, (please print) \_\_\_\_\_, am the credit card holder. I authorize my credit card to be charged the amount indicated above for the purposes of the preparation of an Educational Credential Assessment Report for (Applicant's full name) \_\_\_\_\_ . I have read and agree to all of CES' Terms and Conditions.

**Credit Card Holder Signature:**

**Date** (MM/DD/YYYY):

Once the payment is processed by CES, this payment information will not be retained as part of the application package.

<b>CES Mailing Address</b>
Comparative Education Service (CES) University of Toronto School of Continuing Studies 158 St. George Street Toronto, ON M5S 2V8 Canada Fax: 1-416-978-2185