



REQUEST FOR ACADEMIC RECORDS

International Credential Evaluation Service

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

F 604.435.7033

Instructions: 1) Save this PDF to your desktop, 2) Open with Adobe Reader or Adobe Acrobat, 3) Complete all required fields, 4) Save, 5) Close PDF then re-open to ensure the content you filled in has saved, 6) Submit to BCIT.

		ICES Ref # (if applicable) A0	
Last/Family Name		First/Given Name	
Previous Name (if applicable)	Date of Birth (mm/dd/yyyy)	Email	
Institution Name		Dates Attended	
		From	To
Degree Name (if applicable)	Year of Award (if applicable)	Major	
Student ID or Roll Number from the Sending Institution (if applicable)		Mode of delivery <input type="checkbox"/> Regular / On campus <input type="checkbox"/> Distance education	

I hereby authorize the release of my academic record to the International Credential Evaluation Service (ICES)

Applicant's Signature	Date
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Note to Authorized Official: The above-name person seeks to have his/her credentials evaluated and requests that a transcript of his/her academic records/ statement of makes showing all subjects completed and all grades/marks awarded for all years of study be release to ICES. Please complete this form, place the form and academic record in an envelope, sign and seal the envelope across the flap, and send it directly to ICES at the address below.

Name of Official Completing Form	Title	
Address		
City	Country	Postal Code
Telephone	Fax	
Email	URL	

CONFIRMATION

I confirm that the student named above attended:

Institution Name	Dates of Attendance	
	From	To
Date Credential Awarded (if applicable) (mm/yyyy)		
Authorized Signature and Seal	Date	<input type="checkbox"/> Yes, the applicant's academic transcript/statement of marks is attached to this form.

By postal mail: **International Credential Evaluation Service (ICES)**

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

By email: icesofficialdocs@bcit.ca

PLEASE RETURN THIS FORM TOGETHER WITH THE OFFICIAL ACADEMIC RECORDS/STATEMENT OF MARKS.