

**REQUEST FOR CERTIFICATION – CONTINUING EDUCATION****PLEASE PRINT CLEARLY (*Mandatory Fields)**

*STUDENT ID NUMBER	*DATE OF BIRTH (MM/DD/YYYY)	*EMAIL ADDRESS	
*LAST NAME	*FIRST NAME	FORMER NAME IF APPLICABLE	
*ADDRESS	*CITY	*PROVINCE	*POSTAL CODE
*(AREA CODE) HOME TELEPHONE	(AREA CODE) BUSINESS TELEPHONE	(AREA CODE) CELL PHONE	

DETAILS OF ATTENDANCE:

Certificate being requested: _____ Dates of Attendance: _____

IMPORTANT INFORMATION:

1. Please submit form by email to conedcertificates@nait.ca
2. All courses must be completed, prior learning approved, and marks received prior to submission of this request.
3. Allow up to six weeks for processing.
4. Certificates will not be issued if there is a financial hold on your account. To confirm your status, please check your MyNAIT portal.
5. Certificates are issued digitally through MyCreds™. You will receive an email when your certificate is ready.

Signature: _____

Date: _____

PROGRAM USE ONLY:Milestone Level: ☐ COA ☐ COC ☐ WALLET CARD

Term of Completion _____ Full name of Certificate to be issued: _____

Completion Type: ☐ Program ☐ Course

Effective Date (Last day of last class) _____

Approver/Delegate Name: _____ Approver/Delegate Signature: _____

Portfolio Manager Name (Please print): _____

REGISTRAR'S OFFICE USE ONLY

Date Sent: _____ Initials: _____

Collection and Use of Personal Information: The personal information on this form is being collected under the mandate of the Post-Secondary Learning Act (Alberta) and the Freedom of Information and Protection of Privacy Act (Alberta), and is needed to process your Transcript Request. It will also be used to update your contact information for the Registrar's data base and the Alumni data base. This information is protected under the provisions of the Alberta Freedom of Information and Protection of Privacy Act. If you have any questions about the collection or use of this information, contact the Office of the Registrar at nait.ca/ssc.