STUDENT IDENTIFICATION VALIDATION POLICY

The following is to ensure that we protect students’ privacy and personal information.

1. Usernames and Passwords for PeopleSoft and Academic Computing

For information relating to your accounts and logging into Student Self-Service go to:

http://www.stclaircollege.ca/itservices/

Your Student Self-Service account will provide you with access to your schedule of classes, financial information, course electives and grades, amongst other important bits of information.

2. Telephone Verification and Opt Out Option

Telephone Verification: In the event the student is unable to attend the IT Consolidated Service Desk in person, i.e. geographic location, the student will be referred to the Registrar (or designate) for validation purposes. The Registrar (or designate) will provide information to the student once verification has been confirmed.

Opt Out Option: In the event the student does not want the College to release information over the telephone to anyone, including the student, an opt out form is available. Please see the attached form for details. (The form is also available on the College website, http://www.stclaircollege.ca/registrar/), under “Just the Facts”

3. Transcripts

Requesting

Transcript requests will require at minimum, a 24 to 48 hour turn around period. Active students should be directed to request transcripts using Self Service. Transcript requests can also be made:

1. In person, by completing the attached “Request for Transcript” form.
2. By telephone, if the following information is validated:

   • Student Number
   • Registered Program
   • SIN Number or DOB
   • Current Address

* Opt Out option available. Refer to item #2 for details.
Pick Up

Students must provide photo identification to pick up a transcript.

Mailing of Transcripts

Upon request, transcripts can be mailed to any educational institution, the student’s “Home” or “Local” address providing it matches the Student Information System.

4. Diplomas/Certificates

Requesting

To obtain a diploma or certificate students must complete an “Application for Certificate from Continuing Education” form, or be in their graduating semester.

Pick Up

Students must provide photo identification to pick up a diploma or certificate.

Mailing

Diplomas or certificates can be mailed to the student’s “Home” or “Local” address providing it matches the Student Information System.

After two weeks of the official graduation ceremony, diplomas or certificates that have not been picked up will be mailed to the student’s “Home” address as indicated on the Student Information System.

5. Name Change

Students must provide legal documented proof to change their first or last name. (Examples: Marriage certificate, divorce decree, driver’s license.)

6. Address Change

If possible, students should be directed to change their address using PeopleSoft Self Service. Address changes can also be requested by telephone, if the following information is validated:

- Student Number
- Registered Program
- SIN Number or DOB
- Current Address
7. **Inquiries & Requests to Release Personal Data**

For approved agencies, organizations or individuals (colleges, universities, police, banks, prospective employers, etc.) the Registrar’s Office will only:

- Confirm that a student is or has been registered at the College.
- Confirm whether a student has graduated from a specific program.

Please note that no other student information, including educational history, will be released without:

1. The Registrar’s Office receiving a signed Consent Form from the student which has been received and validated with photo ID.

2. The Registrar’s Office receiving a signed Consent Form from the student that has been notarized and verified using photo ID.

3. The issuing of a legal warrant.

**Opt Out - Telephone Verification**

I, ____________________, do not authorize St. Clair College to release any of my personal or academic information over the telephone, including requests made by myself. The cancellation of this opt out option must be completed through the Registrar’s Office.

**Student Name** ____________________  **Student ID #** ____________________

**Student Signature** ____________________  **Date** ____________________