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DUPLICATE CERTIFICATE REQUEST

Certificate(s) Required: _____

Date of Course(s): _____

First Name: _____ Last Name: _____

Mailing Address: _____

Home Telephone: _____ Business Telephone: _____

Name & Address of Employer (at time of course): _____

Name & Address of Present Employer (if different from above): _____

Birth Date: _____
Day (mandatory) Month (mandatory) Year (optional)

I consent to the collection, use, and disclosure of my personal information by *Global Training Centre, as that information may be required for the purpose of carrying out the training services and other ancillary administration services ("Service") by *Global Training Centre. I authorize *Global Training Centre to collect personal information which may be required by them in order to complete such Services. I authorize *Global Training Centre to provide my personal information to my employer and others when reasonably required to carry out the Services. If I wish to revoke this consent or review my personal information *Global Training Centre has in its possession, I understand that I may do so by contacting *Global Training Centre's Privacy Officer.

Signature of Applicant: _____

Please provide payment of \$26.25 (\$25.00 + 5% GST) per certificate by one of the following methods:

Company Cheque Money Order Visa MasterCard Pre-Approved Billing

Visa/MC # _____ Expiry Date _____

Card Holder Name _____

FOR Global TRAINING CENTRE Use Only

Birth Date matches: Yes No*

*Do not release certificate without Operation Manager's approval: _____

Global Training Centre Representative Signature: _____

Ed1-V6.190308

GTC Safety Training\Forms\Student Forms\Duplicate Certificate Request

*Global Training Centre is a registered trade name of 345245 Alberta Ltd.