Your Street Address

City, State ZIPCODE

Today’s Date

Registrar’s Office

University of Delaware

210 S. College Avenue

Newark, DE 19716

ATTN: Notary/Apostille

To Whom It May Concern:

I am writing to request an Apostille to be applied to my official UD transcript and/or UD diploma. I have included the Apostille checklist with my letter outlining what I am requesting, how I will provide it, and payment information.

Your Name:

Your Contact Information (email/phone):

Payment information (only needed if Registrar’s Office is sending to the DE Secretary of State’s office for you):

Country receiving the Apostille:

When the documents are prepared (check one):

□ I will pick up all documents and deliver to the Delaware Secretary of State myself **OR**

□ The Registrar’s Office should send to the Delaware Secretary of State’s office **OR**

□ The Registrar’s Office should return to me via mail.

When the Apostille is applied to my documents, please:

□ Return everything to me at the above address.

□ Send everything to the following address:

Please contact me with any questions.

Sincerely,

Your Name

Your UDID Number