

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:

When the Apostille is completed (check one):

- I will pick up all documents and deliver to the Delaware Secretary of State myself **OR**
- Should be sent to the Delaware Secretary of State by the Registrar's Office **OR**
- Should be returned to me via mail.

Please contact me with any questions.

Sincerely,

Your Name
Your UDID Number