Apostille: Request to certify and notarize documents for Apostille.

 \Box update SPAIDEN $\ \Box$ SHARQTC $\ \Box$ Holds letter notification



• Documents will not be certified or notarized if there is an outstanding financial obligation with the university.

REQUIRED: Your student enrollment information	
Name (while in attendance):	
,	
Date of Birth (mm/dd/yy):	ID:
Date(s) enrolled & campus:	
Phone #:	E-mail address:
REQUIRED: Identify which document(s) require apostille	
Official Transcript (check one box if needed):	
☐ I have enclosed an office	ial transcript(s), which I previously requested, for your office to notarize.
Diploma (check one box if needed):	
☐ I have enclosed an original diploma(s) for your office to notarize.	
☐ A copy of my diploma.*	
*For a copy of your diploma, please order via www.michaelsutter.com/jwu and enclose it with this request	
Other JWU document(s) requiring apostille (be specific if needed):	
REQUIRED: To submit your request, check each box	
☐ Enclose a pre-paid and pre-addressed envelope(s) in the appropriate size	
☐ Enclose this request and all related documents/forms and mail to: Apostille Processing, Student Academic &	
_	nson & Wales University, 274 Pine Street, Providence, RI 02903.
Upon receipt of your request, allow up to 10 business days for processing.	
Vous cionotaus	D.4.
Your signature: Date:	
Internal Use Only	

December, 2019