CASE WESTERN RESERVE UNIVERSTIY Office of the University Registrar

Request for Notarization of University Documents

First Name:	La	st Name:	EmplID:					
Address:								
Diame.				 				
Phone:	En	nail:						
Please indicate the document	ts to be a	uthenticated and quantity needed:						
Document(s)	Quantity	Please also submit:	Document cost & processing time (does not include authentication)					
☐ Transcript		Transcript Request Form	\$11.00 per transcript; 1-3 days					
☐ Enrollment Verification Letter			No charge; 1-3 days					
☐ Degree Verification Letter			No charge; 1-3 days					
Copy of Diploma		A copy of your Diploma	N/A					
Replacement Diploma		Replacement Diploma Certificate Form	Varies by delivery type selected					
Once documents have been notarized, they will be returned to you. Please provide the address where you would like your document(s) to be mailed:								
Address:								
Please indicate how you woul	d like yo	ur document(s) sent to final destina	tion:					
☐ U.S. Mail ☐ Fed	lEx*							
* The cost to send documents by Fe	dEx is \$21	per address. If you would like the documen	t(s) to be sent by FedEx, please provide	your				
authorization and credit card inform	ation belo	W.						
Will this notarized document(s) be use	ed for apostille authentication?	∕es ⊜No					
,		e for each document type will be income to the Ohio Secretary of State.	luded and are required to be subr	mitted				
Signature: Date:								

Please indicat	te method of pa	yment:							
Cash *Please contact region	Check*	Visa	○ MasterCard	○ Discover					
Credit Card #:		3	CCV#:		Exp. Date:				
Signature of 0	Cardholder:	_ Print Name: _							
Billing Address: (Your credit card information will be destroyed once the process is complete.)									
Form submis	ssion:								
1. Download th	is form to your cor	nputer.							
2. Complete an	d save the form.								
3. Go to the <u>Un</u>	iversity Registrar's	submission page.							
4. Drag and drop file into submission area - or - choose Select Files to locate PDF on your computer.									

For questions regarding this form, please contact the University Registrar's Office at registrar@case.edu or 216-368-4310.

5. Click Submit.