



# REQUEST for NOTARIZATION SERVICES

## UC IRVINE • UNIVERSITY REGISTRAR

Registrar Use Only

Use this form to request notarization services.

### Important Information:

Only an official academic transcript or verification is eligible for notarization; photocopies or other reproductions are unacceptable. A copy of your diploma can be notarized, provided that your original diploma is presented at the time the copy is notarized.

### How Notarization works with Registrar Services:

When you present your original diploma or have the Registrar's Office issue you an official transcript or verification, the University Registrar will produce and sign a letter attesting to the authenticity of your document. A notary will witness and verify the signing of the attestation by the University Registrar staff.

**Fees:** Notarizing your document requires a \$15 notarization fee, per notarial act. The notarization fee is added to the standard fees, if applicable, for Registrar services. Expedited shipping services are available for \$25, per unique address.

**In person Requests:** An appointment is required. You may schedule an appointment by emailing the University Registrar at [registrar@uci.edu](mailto:registrar@uci.edu).

**Mailed requests:** Send the completed form and payment to: UCI Registrar  
Attn: Notary  
215 Aldrich Hall  
Irvine, CA 92697-4975

**Notarization request for:**  **Diploma Copy** ( QTY: \_\_\_\_\_ )  **Transcript** ( QTY: \_\_\_\_\_ )  **Verification** ( QTY: \_\_\_\_\_ )  
 Expedited Shipping ( QTY: \_\_\_\_\_ ) Select this option if you require expedited shipping. **Expedited Shipping Fee required** (see Fee section).

\_\_\_\_\_  
Name on UCI records (Last, First, Middle)

\_\_\_\_\_  
Student ID # (if known)

\_\_\_\_\_  
Current Name (if different)

\_\_\_\_\_  
Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
Current Street Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Email Address

### Send Notarization to:

Same address above: \_\_\_\_\_  
Addressee (Name / Institution)

This address: \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

Select and complete this section if you are authorizing a representative to retrieve this notarization.  
By completing this section and with my signature below, I am authorizing the following individual to help me complete and retrieve this notarization request:  
Name of Authorized Representative: \_\_\_\_\_

\_\_\_\_\_  
Student Signature (required)

\_\_\_\_\_  
Date