



# Office of the Registrar

Phone: (812) 237-2020

Fax: (812) 237-8039

## Apostille Request

The Office of the Registrar will forward apostille requests to the Indiana Secretary of State upon receipt of this form and the items indicated below. After completing this form and providing a signature where required, please mail the request, along with the documents to be notarized and a pre-paid envelope(s)/ shipping label, to the address provided below. **Please note: We will only notarize documents that can be verified with our existing records. This includes, but is not limited to, diplomas, official transcripts, and certificates.**

### Student Requestor Information

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Name                                      University ID# (XXX-XXX-XXX)

### Please Check All That Apply:

- I have enclosed an original transcript(s) for notarization.
- I have enclosed an original diploma(s) for notarization.
- I have enclosed a photocopy of my original diploma(s) for notarization.
- I have enclosed \_\_\_\_\_ for notarization.
- I have requested a  duplicate diploma  transcript through Parchment to be notarized.
- I have enclosed a postage paid envelope(s) required by the Secretary of State (SOS). The envelope(s) includes the address which the State needs to mail these notarized documents once they have attached the apostille.**
- I am requesting that the SOS use FedEx delivery and have provided a prepaid shipping label.
- I have indicated the country requesting the apostille. Country name:** \_\_\_\_\_

**I give my consent to Indiana State University to release this form and the documents above to the indicated address or fax number:**

\_\_\_\_\_  
Street Address                                      City                                      State                                      Zip Code                                      Fax Number

\_\_\_\_\_  
Student Signature                                      Date                                      Phone Number (required by SOS)

**Mail the completed request form, checklist items, and documents to be notarized to:  
Office of the Registrar, Parsons Hall Room 009, Indiana State University, Terre Haute, IN 47809**