1. Complete this form and sign it.
2. Pay at the Cashier’s Office and submit it to the Admissions Office.

**Note: The University is not responsible for keeping requested documents that are not collected within 6 months from the date of request. After six months a new request should be submitted.**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| ID Number: |  | Date of Request: |  |
| Family Name: |  | First Name: |  |
| Father’s Name: |  | Major: |  |
|  |
| Number of Syllabi: |  |  | Number of StudentCopies of Transcript: |  |  |  |
|  |
| Purpose for which the Syllabus will be used:  |
|  |  |
| Specify Course(s): |
|  |  |
| Signature:  |  |
|  |  |
| ***Authorization to a Third Party to Pick Up the Syllabus Copies*** |
| I, the undersigned, allow Ms./Mr.  |  | to pick up my documents. |
| For the authorization to be valid, a copy of the ID/passport should be attached. |
| Signature: |  |
|  |
| ***Party Picking Up the Syllabus Copies*** |
| Signature of Person Receiving the Certificate: |  | Date: |  |
| Fees Paid: |  | Request Received By: |  | Request Prepared By: |  |
| Signature of Cashier: |  | Expected Date of Issue: |  | Date of Issue: |  |