



APPLICATION FOR CERTIFIED COPY OF DIPLOMA

*Note that your signature below must be notarized. Please contact Office of the Secretary, Diplomas at 203.432.7141 with any questions regarding this application. Mail completed application, with a legible copy of your Yale University diploma and a \$20 processing fee (payable to Yale University), to: Office of the Secretary, Diplomas, P.O. Box 208230, New Haven, Connecticut 06520-8230; or, for overnight delivery, to Office of the Secretary, Diplomas, 105 Wall St., Rm. 1, New Haven, Connecticut 06511.*

Name \_\_\_\_\_ Date \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip code \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Degree and date \_\_\_\_\_ School \_\_\_\_\_

Reason for requesting a certified copy of your diploma \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the above statements are true. I understand that Yale University reserves the right to institute any appropriate legal or other proceedings for misrepresentation of the information stated above, or in the case of fraud.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I hereby certify that this applicant has shown proof of identity sufficient to establish that he or she is the person named above.

Notary Public \_\_\_\_\_ Date \_\_\_\_\_

My commission expires on: \_\_\_\_\_