

## **Authorization to Pick Up Official Documents**

(Transcripts, Certifications, Diplomas)

**Instructions:** You may designate a third party to pick up your transcript, certification or diploma at the Office of the University Registrar by completing the form below. These documents will only be released to the third party designated in the "Third Party Information" section of this form when they provide valid photo identification. Forms must be emailed to our office by the student requesting their transcript, certification, or diploma and cannot be accepted by the third party.

Student Information				
Full Name				Date
Student ID #		Self FERPA Passcode		
* You can create a self FERPA Passcode in Hokie Spa and set the relationship as "SELF". This is required when submitting this form.				
Contact Phone	Conta	ct E-Mail		
Third Party Information				
Full Name				
Form of ID Provided				
Signed Authorization				
I,, hereby authorize				
(Print Your Name)			(Print Third Party Name)	
to pick up my:				
☐ Transcript	□с	ertification	☐ Dij	ploma
Student Signature				Date
	Third Party Signature	(To be signed at the Office of	the University Registrar)	
Third Party Signatur	е			Date
Administrative Use Only				
Received By				Date