

# Request for Apostille or Certification of Documents (Transcripts & Diplomas)



UNIVERSITY  
of HAWAII®  
MĀNOA

The Office of the Registrar can authenticate and notarize your transcript or diploma by following the procedures below. Note: Apostille procedures can also be found at <https://itgov.hawaii.gov/application-for-apostille-or-certification-of-documents/>. Please check this website for updates or revisions.

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## STUDENT INFORMATION – Required to identify your record

Full Name (Last, First, M.I.): \_\_\_\_\_ UH ID OR USERNAME: \_\_\_\_\_

Other Name(s) Used (Last, First, M.I.): \_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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## REQUESTED DOCUMENTS AND ADDITIONAL ITEMS NEEDED:

**Application for Apostille of Certification of Documents** for all documents

Form found at: <https://itgov.hawaii.gov/application-for-apostille-or-certification-of-documents/>

Qty Transcript(s)

Please order your transcript(s) online from the National Student Clearinghouse. Select the option to send transcripts to Employer/Other and enter the business name as "Apostille".

Qty Diploma(s)

Please provide your original diploma **or** a legible black/white copy of your diploma

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## SENDING INSTRUCTIONS AND ADDITIONAL ITEMS NEEDED:

1. Postage paid envelope addressed to: *First Circuit Court, Legal Documents Section  
777 Punchbowl Street  
Honolulu, HI 96813*
  2. Postage paid envelope addressed to: *Office of the Lieutenant Governor  
State Capitol, Fifth Floor  
Honolulu, HI 96813*
  3. Cashier's check or Money Order in U.S. funds:
    - a. \$3.00 per document payable to First Circuit Court
  4. Cashier's check or Money Order in U.S. funds:
    - a. \$1.00 per document payable to Office of the Lieutenant Governor
  5. Self-addressed, postage paid envelope addressed to: *The address all completed (Apostille) documents will go to*
  6. Send all of the above to: *Office of the Registrar  
Queen Lili'uokalani Center for Student Services  
2600 Campus Road, Room 010  
Honolulu, HI 96822*
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## ADDITIONAL NOTES IF NECESSARY:

STUDENT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

*Authorization Signature Required: I authorize the release of information as directed on this request form.*