INDIANA WESLEYAN UNIVERSITY

Registrar's Office 4201 S. Washington St. Marion, IN 46953 |
Email: registrar@indwes.edu | Fax: 765-677-2662 | Tel: 765-677-2131

APOSTILLE REQUEST

Submission Instructions

1. Please print and complete this form in its entirety and email, mail, or fax to the Registrar's Office as listed above.
2. Upon review of your form, the IWU Registrar's Office will send you an email with a ShopSite payment link.
3. A ShopSite receipt will be delivered to you and the Registrar's Office, at which time the apostille will be sent.

Student Information

Student name _____ Student ID or Date of Birth _____

Address _____

Telephone number _____ What country will be using this apostille? _____

Email address _____ Country ID Number, State/Country of issuance (for international requestors) _____

Full document apostille (diploma and transcript) mailed with the United states is $50. All out of the country postage will be calculated by IWU and paid by the student prior to mailing.

Letter only apostille mailed within the United States is $30. All out of country postage will be calculated by IWU and paid by the student prior to mailing.

- If additional items are required, please include document listing required items.
- An apostille will not be issued to students who have outstanding financial obligations with the University. Please contact the accounting office at Indiana Wesleyan University if you are unsure of your status or account balance.

Name and Mailing Address of FINAL Destination for Documents - please allow 7 to 10 business days for processing with additional time for mailing.

Organization Name _____

ATTN: _____

Address _____

City / State / Country _____

I authorize the Registrar's Office at IWU, Marion, IN, to process this request and send it to the name and address listed above.

Signature: _____ **Date: _____**