

Authorization to Pick Up Official Documents

University of Hawaii at Hilo
Office of the Registrar
200 W. Kawili St.
Hilo, HI 96720
Phone: (808) 974-7322
Fax: (808) 933-0862

Part I: Student Information

Full Name: _____ Date: _____

Student ID#: _____ Phone#: _____

Contact Email: _____

You may designate a third party to pick up your transcript, certification, or diploma at the Office of the Registrar. Authorized third party must present legal photo ID and signed release form at time of pick up.

Part II: Authorization for Third Party

I, _____, authorize _____
(print your name) (print third party name)

to pick up my :

- Transcript
- Certification
- Diploma
- Other: _____
(list other)

Student Signature: _____ Date: _____

This form must be signed by third party after documents are received

Third Party Signature: _____ Date: _____

Office of the Registrar Use Only

Verified by: _____ Date: _____