

**Application Form for a Certified English Translation**  
(Form Must Be Notarized)

Complete this form and send it to:  
Diploma Coordinator  
Office of the University Secretary  
University of Pennsylvania  
1 College Hall, Room 211  
Philadelphia, PA 19104-6303

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name on Original Certificate \_\_\_\_\_

**Degree Information**

School: \_\_\_\_\_

Degree: \_\_\_\_\_

Month/Date/Year: \_\_\_\_\_

Reason for Request \_\_\_\_\_

Student Id Number (not Social Security Number): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Tele No.: \_\_\_\_\_

Please Send Letter of Certification to (If Not Your Own Address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fee: No charge.

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

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NOTARY SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

COMMISSION EXPIRATION \_\_\_\_\_