



Authorization for Document Pick Up

Student Name _____ Student ID _____

I authorize _____ to pick up the following documents on my behalf.

(Please check all that apply)

- Diploma/Certificate
- Enrollment/Degree Letter
- Transcript

Signature _____ Date _____

- **All holds must be removed. Diplomas and transcripts will not be released for students with a hold on their account.**
- **The person authorized to pick up the documents will be required to show photo ID at the time of pickup.**
- **This authorization form is valid for 30 days after the date signed.**

Return completed form to:
UMKC Registration & Records Office
Administrative Center, Room 115
Email: registrar@umkc.edu
Fax: (816)235-5513

For questions call (816) 235-1125