



Universidade do Minho
Serviços Académicos

FORM REQUEST FOR COURSE CERTIFICATE/DIPLOMA	Register: _____ Received on: ____/____/____ By: _____
---	---

Full Name: _____
Course/Degree: _____ Number: _____
Gender: Female <input type="checkbox"/> Male <input type="checkbox"/> Final grade: _____ Please specify if applied for grade improvement exams: Yes <input type="checkbox"/> No <input type="checkbox"/>

Parents
Father: _____
Mother: _____
Place of birth
Country: _____ Parish: _____
Municipality: _____ District: _____

Address: _____ _____
Postal Code: _____ - _____ Telephone: _____
E-mail: _____

Requests issuance of:
<input type="checkbox"/> Master Degree Diploma
<input type="checkbox"/> PhD Degree Diploma
<input type="checkbox"/> Diploma of "Agregação"
<input type="checkbox"/> Specialisation Course Diploma
<input type="checkbox"/> Certificate of completion of the curricular component of Master degree
<input type="checkbox"/> Certificate of completion of the curricular component of PhD degree
Requests urgent issuance of the document? Yes <input type="checkbox"/> No <input type="checkbox"/>
Requests the document to be sent by mail to the above-mentioned address? Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>(urgent issuance and mail delivery shall involve payment of fees as established in the respective table, currently in force)</i>

v.s.f.f.

The undersigned / applicant hereby declares on oath:

1. To be aware of the fact that, after having requested the Course Certificate/Diploma, he/she will not be able to apply for any grade improvement exams;
2. That the data contained herein, as well as in his/her academic records, are totally correct, thus taking full responsibility for any possible errors in the said Course Certificate/Diploma, provided the latter is issued according with them.
3. That the address given is correct and that he/she commits himself/herself upon maintaining it updated in the Academic Services until the retrieval/collection of the respective Course Certificate/Diploma, thus taking responsibility for non-delivery of correspondence, provided the latter was sent to the last address indicated to the Academic Services;
4. To be aware of the fact that the Course Certificate/Diploma must be collected within 30 days after notification by the Academic Services, by which afterwards it will be deposited on cold case, being the said person responsible for its potential disposal;
5. To be aware of the fact that, upon choosing the delivery of the Course Certificate/Diploma by mail, it will be his/her responsibility for any potential damage or loss of the documentation submitted on his/her behalf;
6. That he/she does not have any late or pending tuition fees and that he/she is not in a situation of non-compliance by the University of Minho (provided there is a situation of late payment, this request will be considered null and void);
7. To be aware of the fact that if he/she has proceeded with the payment of tuition fees past the established deadline the corresponding interest in arrears for late payment will be applied, according to the legislation in force;
8. To be aware of the fact that there is a 180-day deadline established according to the Academic Regulation of the University of Minho for the issuance of Course Certificates/Diploma. In case of applications requesting urgent emission, there will be a 60-day deadline, at the latest.

University of Minho, _____ of _____ of _____

Signature: _____

Note: Please attach document of identification (for validation of personal record)

If the document of Identification is the Citizen Card.:

I agree with having the Citizen Card copied, which shall be annexed / enclosed hereto

I do not agree with having the Citizen Card copied, thus committing myself to showing proof of it whenever requested.