## **Authorization Letter**

I,	(Nai	ne:, Student ID number:	, Date of Birth:
		, Programme of study registered at XJTLU:	), hereby
au	thori	ze the following person: name:; relati	ionship with me:
		; National ID/Passport:	, to collect the
following documents on my behalf:			
I am an undergraduate student, documents details (please tick the appropriate box (es))			
	]	Degree Certificate of XJTLU	
Degree Certificate of University of Liverpool (4+0)			
	]	Graduation Certificate of XJTLU	
	]	Academic Transcript	
<u>I am a postgraduate student</u> , documents details (please tick the appropriate box (es))			
	]	Degree Certificate of University of Liverpool	
	]	Record of Study	
My personal contact details are:			
Mobile: Email:		: Email:	
Signature of the applicant Date			
* Note by the Registry:			
A document bearing the student's signature (e.g. copy of National ID or passport) must accompany this			
form. Photo ID of proxy must be presented at time of collection.			