ACADEMIC AFFAIRS
OFFICE OF THE REGISTRAR

TEXAS A&M UNIVERSITY

Department Signature Card for 2017 - 2018 Academic Year

This form can be filled out and then printed for signatures. Upon completion, this form should be returned to Texas A&M University's Office of the Registrar sealed departmental letterhead envelope either: in person; mail (campus mail or U.S. postal service); fax; or scanned and sent via Filex. Please see Signature Card Instructions for delivery option details.

Any questions may be directed to 979-845-1031 or registrar@tamu.edu.

Effective Date _____ Is this a change to an already existing card? _____ Is this a replacement of an already existing card? _____

Please send updated cards anytime there is a change to signature authority for your college/department/program.

Department/Program _____ Mail Stop: _____

Signature Card Contact: _____ Phone _____ E-mail _____

I authorize the following individual(s) to sign for the following actions within the Office of the Registrar (check all that apply):

Name (type or print)	**Title**	**UIN** (for online access)	**Course Prefixes** (for grade changes)	**Authorized Actions** (Check all that apply)			**Signature** (or type "Remove" if authority is being removed for this person)
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	
				☐ GC	☐ OA	☐ DH	

GC – Grade Changes (Online & Paper)

OA – Online Adjustments (Graduate Certificate Programs, Additional Curriculum Requests, or Professional Degree Program Adjustment Requests only)

DH – Department Head Designate (Registration, Scheduling, and other documents requiring Department Head/Director approval)

Department Head (type or print name) _____ **UIN** (for online access) _____ **Signature** _____ **Date** _____

Reset