



Authorized Signatures

Department: _____ Date: _____

Authorized Signatures for Student Forms (no student signatures allowed)

<u>Form</u>	<u>Authorized Signer (print name)</u>	<u>Authorized Signature</u>
Directed Research	_____	_____
Independent Study (Grad)	_____	_____
Independent Study (Undergrad)	_____	_____
Reading & Conference	_____	_____
Exceed Maximum Course Registration	_____	_____
Drop After the Deadline	_____	_____
Request to Repeat Graduate Course	_____	_____

Additional Authorized Signatures

<u>Additional Form</u>	<u>Authorized Signer (print name)</u>	<u>Authorized Signature</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please note: out-of-date forms will not be accepted by the Registrar's Office. The most recent versions can be found on the Registrar's website at <https://www.boisestate.edu/registrar/student-forms/>

Deliver to: Registrar's Office, Administration Building Room 110, 1910 University Drive, Boise, ID 83725-1365
E-mail: specialregistration@boisestate.edu | **Phone:** (208) 426-4249 | **FAX:** (208) 426-3169