

**Department Chair/Head Signature Form**  
Office of the Registrar, University of Memphis, 003 Wilder Tower / Fax: 678-5757

**As Chair/Head, I have signature approval for the following as they pertain to my department:**

- Grade changes
- Incomplete (I) grade extensions
- Changes from/to Standard grading to/from Audit grading
- Requests for non-standard course offerings
- Access to Internet Native Banner (INB) for employees within my department
- Access to Student INB information for students doing approved research
- Undergraduate credit by exam
- Graduate credit by exam

**I am providing my signature for the Registrar's reference.**

Name: \_\_\_\_\_

Dept: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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**Dean's Approval**

Name: \_\_\_\_\_

College/School: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_