Department of Biology
COURIER SERVICE REQUEST
(FEDEX, UPS, AND AIRBORNE EXPRESS)

I, Dr._____authorize _____
(*Print Faculty Member Name*) (*Student or Staff Member)*

To use □ FedEx for shipment of a □ Package
□ UPS □ Document
□ Airborne
□ Other

_____ _____ .
(*Faculty member signature*) (*DATE*)

Comments_____

_____

Tracking No._____