



Mailing or Pick-Up Authorization

DU Student ID #: \_\_\_\_\_

Family (Last) Name: \_\_\_\_\_ Given (First) Name: \_\_\_\_\_

What is the document to be mailed or picked up? \_\_\_\_\_

Authorization for Third Party Pickup

\*PERSON PICKING UP MUST PRESENT ID TO PICK UP.

Name of person picking up: Last: \_\_\_\_\_ First: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone number of third party: \_\_\_\_\_

I authorize ISSS to allow the above named individual to pick up my immigration document(s) for me. I will not hold the University of Denver responsible for any consequences of having my document picked up by this third party, such as loss, damage, theft, or negative effect on my immigration status.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be signed AT PICKUP by third party:

I am the above named individual and I will give the documents named above to the student within 30 days of pickup.

Signature of third party: \_\_\_\_\_ Date: \_\_\_\_\_

Authorization to Mail Immigration Document(s)

Send to this address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Province: \_\_\_\_\_

ZIP/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a residence or business address? \_\_\_ Residence \_\_\_ Business

Please indicate the type of service wanted for shipping your document(s)

Domestic

[ ] FedEx Priority Overnight [ ] FedEx Standard Overnight [ ] FedEx 2Day [ ] FedEx Saver [ ] U.S. Postal Service

International

[ ] FedEx International First [ ] FedEx International Priority [ ] FedEx International Economy

Amount owed to ISSS if shipping via FedEx: \_\_\_\_\_ U.S. Dollars (Please request a quote from ISSS)

NOTE: This authorization form is not complete until payment is made in full. ISSS reserves the right to hold registration and/or withhold services until payment is made. A hold will be placed on your DU account until payment is received.

I authorize ISSS to mail my immigration document(s) to me at the above address. I will not hold the University of Denver responsible for any consequences of mailing my document(s), such as loss, damage, theft, or negative effect on my immigration status.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_