ACTIVITY SIGNATURE AUTHORIZATION FORM

TO: Title III Program Office

FROM:

The following individuals(s) is (are) hereby authorized to receive budget information, sign requisitions and other related spending requests (employment recommendations must be signed by both the activity director and the respective dean) per the above Title III Account.

*Signature authority can only be assigned to individuals at a Coordinator's position level or above.*

_________       __________       __________       __________
Print Name          Signature          Position Title       Date

_________       __________       __________       __________
Print Name          Signature          Position Title       Date

Signed: ____________________

Date: ____________________

Assigned Property Manager: ____________________________________________