

STOCKTON UNIVERSITY
DELEGATION OF SIGNATORY AND APPROVAL AUTHORITY

The undersigned manager delegates signatory and approval authority to the individual and within the limits indicated below.

Note: Managers may only delegate signatory and approval authority that they themselves have. A copy of this form should be filed with the Chief of Staff, Office of the President and with the offices responsible for the areas where authority has been delegated. Delegation of signatory authority is subject to the provisions of University Procedure number 6416, entitled Signatory Authority. The effective date of the delegation is the date of execution of this form unless otherwise indicated.

Department: _____ Division: _____

Signatory and approval authority is hereby assigned to:

Name Title Signature

Category of actions and limits, as appropriate:

	Non-
Delegated Approval	Delegated Approval

Requisitions up to the following amount: _____

Payments up to the following amount: _____

Contracts up to the following amount: _____

Bid Waiver Requests up to the following amount: _____

Travel Approval

Entertainment/Catering Approval

Personnel Actions

Additional comments or limitations, such as effective dates:

The signatory authority may be canceled at any time without notice by the delegating manager, the division head or by the President, and will automatically be canceled upon the termination of a manager's position at the University.

Delegating Official:

Name

Title

Signature

Date

Approved By:

Senior Vice President for Administration and
Finance and Chief Financial Officer

Date