



COMPUTING CENTER

Departmental Fund Authorization for Printing Charges

It is our policy that anyone wishing to charge print jobs to a departmental account must have authorization from one of the following: Chair, Dean, or Business Manager of that department. We require that this form be filled out in its entirety and signed by the appropriate authority before printing.

Name *(you may list more than one)*

Email

Specific Print Jobs *(size, format, and content)*

Dates for use *(one time or until)*

I hereby grant the named person(s) permission to charge these print jobs to the departmental account listed on this form.

Authorized Signature	Name <i>(print)</i>
<input type="checkbox"/> Chair <input type="checkbox"/> Dean <input type="checkbox"/> Business Manager <input type="checkbox"/> Director	

Position <i>(circle one)</i>	Email
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Phone	Department name
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(Required) Oper Unit/Dept/ Fund Number/ Class	(Optional) BUS Unit/Project/Activity/AN Type <small>*****</small>
	For Office Use Only Customer # _____