## **NORTHERN ARIZONA UNIVERSITY**

## **Signature/Approval Delegation Form for Sponsored Projects**

TO: FROM: DATE:	Sponsored Projects Services
	, as principal investigator, hereby authorize Employee
ID	, to approve all requisition documents in Peoplesoft on my behalf.
Project ID _	, Project Title
Project ID _	, Project Title
Project ID _	, Project Title
Project ID _	, Project Title
Please attach a	ist if more than 4 projects are applicable.
allowable, a policies, OM and practica signature au	and signing Authorized Individual are responsible for ensuring expenditures are llocable (i.e. beneficial to the project) and otherwise compliant with University IB circulars, sponsor policies, and award terms and conditions. While it is acceptable If for the PI to have assistance in financial management, standards for delegation for athority to acquire goods and/or services purchased on sponsored project funds must the PI maintains oversight and only appropriate expenditures are approved.
PI Signature	<del></del>
I understand	d that signature authority has been granted to me as indicated above.
 Signature of	Authorized Individual

Please direct questions to Kerri Byrd, Director, Sponsored Project Services 928-523-6466

RETURN FORM TO SPS BOX 4070