

Project Authorization Amendment

FUND(S) TO AMEND

Fund Number: _____ Fund Name: _____

Fund Number: _____ Fund Name: _____

* For global fund changes enter the three letter college/department heading on the spaces below*

Project ID: _____ School / Department Name _____

INDIVIDUAL(S) TO ADD

Name: _____ Title: _____ Director
 Approver
 Phone Ext.: _____ E-mail Address: _____

Name: _____ Title: _____ Director
 Approver
 Phone Ext.: _____ E-mail Address: _____

Name: _____ Title: _____ Director
 Approver
 Phone Ext.: _____ E-mail Address: _____

Each fund is limited to four (4) directors and four (4) approvers

INDIVIDUAL(S) TO REMOVE

Name: _____ Title: _____ Director
 Approver

Name: _____ Title: _____ Director
 Approver

Name: _____ Title: _____ Director
 Approver

All funds must maintain two (2) project directors and two (2) project approvers

VERIFICATION OF CHANGES

Approved By: _____

Authorized Signature _____

Date _____

Dean or Vice President's Signature

**Please ensure that all new approvers/directors have a Project Signature Card on file*
 (Cards can be requested from the Foundation, extension 7-2891)*