



# Authorized Signature Form

1. Do NOT use abbreviations or nicknames.
2. Please use Towson University e-mail address.
3. For scanning, must keep all parts of signature inside the box

Speedtype-Dept or Grant # \_\_\_\_\_

Name of Dept or Grant: \_\_\_\_\_

Effective Date (mm/dd/yy): \_\_\_\_\_

Submitted for the following reason (Please check box):

- New Department or Grant Code (minimum 2 signers required)
- Replaces Form on File
- Add Name(s) (New signer(s) & Dept Head only)

## DEPARTMENT HEAD SIGNATURE AND APPROVAL (REQUIRED):

\_\_\_\_\_ Full First Name (Print)

\_\_\_\_\_ Last Name (Print)

\_\_\_\_\_ E-mail Address (Print)

**Important: Keep entire Signature inside the lines of the box**

## RESPONSIBLE PERSON SIGNATURE AND APPROVAL (REQUIRED IF DIFFERENT FROM DEPT HEAD):

\_\_\_\_\_ Full First Name

\_\_\_\_\_ Last Name (Print)

\_\_\_\_\_ E-mail Address (Print)

**Important: Keep entire Signature inside the lines of the box**

## AUTHORIZED DEPARTMENTAL EMPLOYEES:

The following employees are authorized to approve payment of all financial documents for this department/grant (ex: invoices, vouchers, interdepartmental transfers). Please print proper name and e-mail address. Use additional forms if necessary.

1. \_\_\_\_\_  
First Name

\_\_\_\_\_ Last Name

\_\_\_\_\_ E-mail Address

**Important: Keep entire Signature inside the lines of the box**

2. \_\_\_\_\_  
First Name

\_\_\_\_\_ Last Name

\_\_\_\_\_ E-mail Address

**Important: Keep entire Signature inside the lines of the box**

3. \_\_\_\_\_  
First Name

\_\_\_\_\_ Last Name

\_\_\_\_\_ E-mail Address

**Important: Keep entire Signature inside the lines of the box**

**Please return this form to Financial Services**