

Vancouver Island University -- Signing Authority



Date:	
Name:	
Username:	
Title/Position:	
Department:	

Authority to sign for (check all that apply):

- General Signing Authority
- All Work Order(s) in Division
- All Work Order(s) in Sub-Division

Division/Sub-Division Limit Effective Date

To Remove Authority Only

Please remove authority

Initials: _____

Date requested: _____

Fill in the fields below (if necessary) before printing the form

Work Order (s)	Limit	Effective Date	Remove Date
	\$		
	\$		
	\$		
	\$		
	\$		

This is a complete list of work orders

This is in addition to the list of work orders already on file in Finance

Date:	
Sample Signature:	
Authorized By:	
Authorizing Signature:	

Print, obtain sample signature and authorization, and deliver to Financial Services via email to

*generalaccounting@viu.ca Scan a 2nd copy for your records. **NOTE: Manual sample signatures are required***