

Authorized Signature Form for Departments

****The submission of this form will void all previous authorization forms.****

Department ID: <i>(One Per Form)</i>	Department Name:		
Department Manager: <i>(Printed Name)</i>	Title/Position:	Blg./RM#	Phone #:

ePro: To setup eProcurement Workflow in PS Financials V8.9, it is required to have at least one person marked as a requisition to have at least one person marked as a requisition approver, indicated by checking the ePro box by his/her name. This ePro approver will receive an email for department approval. You may choose to have more than one requisition approver; however, only one departmental approver is required to approve the requisition. Those without the epro box marked will be an authorized signer, but will not received, any emails.

Employee's GRU Empl ID	Print Name of Authorized Employee	Authorized Employee Signature	ePro

Fax Completed form to the Controller's Division at 706-434-7130.



SIGN HERE

Department Manager Signature

Date

-- Controller's Division Only --

Processed by: _____ Date Entered: _____