



PI Name:		Home Dept.:	
Sponsor Award #:		Agency:	
Yale Award #:		Award Owning Cost Center:	
Award Period Start Date:		Period Budget:	
Award Period End Date:		Primary Financial Reviewer for Award:	

Please list those individuals who are authorized to make financial transactions on this sponsored award. These individuals should initial this form and retain a copy for their reference.

Name	Initial	Dollar Limit (\$)	POs – Workday and SciQuest (X)	Expense Reports (X)	PCard (X)	Invoice Approvals (X)	Check Requests (X)	Petty Cash (X)	Travel Advances (X)	Shipping (X)	USP Purchases (X)	Other (specify) (X)

PI Signature

Date

Please note that effective July 1, 2010, Requestors will be required to complete appropriate sponsored projects training.