

Policy Pre-Approval Form

Applicable period: _____ to _____

(Note: all overnight travel must be pre-approved prior to the travel using the Travel Request Via Concur, not this form)

As a duly authorized administrator referenced in the indicated policies, I pre-approve the following expenditures as part of those policies *(check all that apply)*:

<p>Alcohol purchases to be incurred by <small>(faculty/staff name)</small> <i>(Policy 2.1.1; signature by senior vice president, vice president, or dean)</i></p>
<p>Employee recruiting expenses in excess of the per person per day limits, but \$200 or less, to be incurred by <small>(faculty/staff name)</small> and associated with the high level position of <i>(Policy 2.1.2; signature by senior vice president, vice president or dean)</i></p>
<p>Entertainment and meal expenses in excess of \$75 per person per event to be incurred by <small>(faculty/staff name)</small> for <small>(event)</small> <i>(Policy 2.1.3; signature by senior vice president, vice president, or dean)</i></p>
<p>First class or business fare, due to a medical condition for <small>(faculty/staff name)</small> and as documented and approved by University Health Services. <i>(Policy 2.1.6; signature by traveler's supervisor)</i></p>
<p>Travel by charter flight; list all travelers (or attach) <i>(Policy 2.1.6; signature by president or senior vice president)</i></p>
<p>Employee rewards/bonuses of merchandise or cash/cash equivalents up to \$500 for <small>(faculty/staff name)</small> <i>(Policy 3.3.1; signature by organizational unit manager)</i></p>
<p>Employee rewards/bonuses of merchandise or cash/cash equivalents greater than \$500 for <small>(faculty/staff name)</small> <i>(Policy 3.3.1; signature by senior vice president, vice president, or dean)</i></p>
<p>Memberships or dues to the private club <small>(name of club)</small> for <small>(faculty/staff name)</small> <i>(Policy 2.1.5; signature by senior vice president, vice president or dean)</i></p>
<p>Other:</p>

Provide the required signature based on the pre-approval(s) indicated above:

Type/Print Name	Signature	Date
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This signed and dated Policy Pre-Approval Form (along with any appropriate attachments) must be included with the reimbursement requests or the Purchasing Card Log, as applicable. Units should retain a copy of signed pre-approvals and make them available upon request from Internal Audit.