

Unless there has been a change of PD, this is the official record for this project for the entire performance period.

Date:

Account Number:

Project Director Name (print):

Project Title:

Signature:

College:

Department:

Division:

For CSUDH Foundation USE ONLY  
Name:  Update in GLUPKY:  File in award file:  Date:

## REQUEST FOR ADDITIONAL AUTHORIZED SIGNERS

### ACCOUNT INFORMATION

This agreement is used to designate employees authorized to approve expenditures related to this grant/contract project. By signing this agreement, the project director agrees to be responsible for the programmatic and financial management and conduct of the project ensuring that the work is accomplished in a timely manner and is administered within the requirements of the awarding agency and the California State University Dominguez Hills Foundation. Per CSU Chancellor's Office Executive Order 890, I understand that the Foundation is the employer of the project director and other program employees with regards to the work being performed relating to the project detailed below. In addition, the individuals listed below certify that all expenditures will be in compliance with the educational mission of the University, the policies and procedures of the Foundation, and the restrictions imposed by the awarding agency. If the signature authority is delegated to other individuals, it is understood that the project director and the Deans/Vice Presidents are ultimately responsible for all expenditures incurred relating to this project. In addition, the project director agrees to have all programmatic and financial reports to the agency in a timely basis as directed by the specific award requirements. Deans/Vice Presidents understand that they also have programmatic and fiscal oversight responsibility for the project detailed below.

Please add the following additional signer on the listed account(s) above for the following period:

For the entire grant period    For the period only:        
Start Date                      End Date

Please note that it is the project director's responsibility to manage and maintain an understanding of his or her budget, expenses shared to date, and account balance. Please contact Post Award Management Service for further information.

You as the PD may delegate signature authority for the following expense activity:

- Purchases
- Travel
- Receipt of Goods and Services
- University Charge back Invoices

You as the PD may not delegate signature authority for the following expense activity:

- Expense Transfer
- Budget Modifications
- Sponsor/Agency Required Reports
- Payroll
- Effort Reporting

### REASON FOR ADDING ADDITIONAL SIGNER

Please enter reason in the box below:

### AUTHORIZED SIGNATURES

Additional Authorized Signer Name (Print)	Signature                      Date
Additional Authorized Signer Name (Print)	Signature                      Date
Additional Authorized Signer Name (Print)	Signature                      Date
Project Director Name (Print)	Signature                      Date

For CSUDH Foundation USE ONLY

Name: \_\_\_\_\_ Update in GLUPKY: \_\_\_\_\_ File in award file: \_\_\_\_\_ Date: \_\_\_\_\_