## **Authorization Form for Financial Management of OSP Fund/Index**

Financial management to	r the following OSP tu	ina/ina	dex num	pers, includir	ng Banner
home organization access	s to				_, will be provided
bv	(Center/Institute B/F	<sub>=M)</sub> effec	ctive	(NetID)	•
by(Center/Institute B/F		_		(Date)	
<u>Grant Fund/Index #</u>	Home Organization		<u>Financ</u>	ial Managen	nent Organization
		-			<del>-</del>
		-			_
		-			_
Approved		-			_
Approved:					
Principal Investigator		Date			
Department Head (Home Organization)		Date			
Center/Institute Director		Date			
OSP Fiscal Manager		Date			
Banner Finance/Security		Date			

<sup>\*</sup>Please include a copy to the VPRED Budget Director