

1. Name of Requesting Department: \_\_\_\_\_
2. Name of Professional Organization: \_\_\_\_\_
3. Estimated Annual Amount of Membership or Dues: \_\_\_\_\_
4. Source of Funding (Sub-Account): \_\_\_\_\_
5. Summary Statement of Goals and/or Objectives of the Professional Organization:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Summary statement on benefits to be derived by the University through this membership or dues:  
\_\_\_\_\_  
\_\_\_\_\_
7. Other comments pertinent to this request (optional): \_\_\_\_\_  
\_\_\_\_\_

Signature of Budgetary Head

Title of Budgetary Head

---

Date \_\_\_\_\_

APPROVED - DISAPPROVED

---

|                |      |
|----------------|------|
| Vice-President | Date |
|----------------|------|

---

|                 |            |
|-----------------|------------|
| President _____ | Date _____ |
|-----------------|------------|

☐ **Procurement Card**      ☐ **Exempt Purchase Document No. (E-Doc)**