

**JUSTIFICATION FOR
MEMBERSHIP TO A PROFESSIONAL ORGANIZATION**

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 Department / Budgetary Head

Title of Department / Budgetary Head

Date

APPROVED - DISAPPROVED

APPROVED - DISAPPROVED

Dean/Director

Date

Division Vice-President

Date

NOTE: INDICATE PROCUREMENT TYPE BELOW AND INCLUDE PURCHASE DOCUMENT NO. IF APPLICABLE

*The approved form must accompany the purchase payment document i.e. ProCard Expense Report, PantherBuy System attachment

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Procurement Card

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**PantherBuy Non-P.O. Based
Invoice Document No.**

Return this Form to: _____

Contact Phone No. _____