

**SIGNATURE AUTHORIZATION/DELEGATION**

DEPARTMENT: COMPUTING & COMMUNICATIONS  
SUBJECT: Computer Systems Access, Use, and Security

Policy No: 400-35  
February 14, 2003

Department Name:

Check the desired action(s) below:

**Establish Signature Authority**

By signing below I certify that I am the Department Head or Dean with responsibility and authority to manage funds and administrative action. Further, I understand that I have authority to approve a request for an individual's logon ID and UCR Net ID which is considered equivalent to a signature for some system action.

Signature of Department Head or Dean Date

Printed of Department Head or Dean Payroll Title

**Add Delegate to Signature Authority**

The delegate specified below is granted the authority to request a logon ID and UCR Net ID for an individual. By Signing below I certify that I have been granted authority to request a logon ID for an individual - which is considered equivalent to a signature for some system actions.

Signature of Authorized Delegate Date

Printed name of Authorized Delegate Payroll Title

Signature of Department Head or Dean Date

**Cancel Department Head/Delegate**

Printed name to be canceled Date

Signature of Department Head or Dean Date

Submit the completed form to Computing & Communications.