

SJSU Research Foundation

OFFICE OF SPONSORED PROGRAMS

Request for Additional Authorized Signers

SJSU Research Foundation Account Number: _____

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

☐

For the entire grant period

☐

For this period only: _____ to _____

Please note that it is the principal investigator's responsibility to manage and maintain an understanding of his or her budget, expenses charged to date, and account balance. Financial information is provided in the form of monthly financial reports. Please contact your sponsored programs analyst for further information.

Reason for adding additional signer:

Authorized Signatures for Expenditures:

Additional Authorized Signer's Signature

Additional Signer's Printed Name

Principal Investigator's Signature

Principal Investigator Printed Name

For SJSU Research Foundation USE ONLY

_____ Update in Workday

_____ File under correspondence of the award folder