

Operating Request

FOAPAL Number:
Account Name:
Funding Amount:
Item Requested:
Justification (include the assessment basis for your request):
Effect on Department if Funding is not Granted:

Note: The signature of the Director of Technical Services is required for software purchases exceeding \$5,000.

Requested by: _____
Department Head/Manager/Director

Recommended by: _____
Dean

Recommended by: _____
Vice President

Approved by: _____
President

Approved by: _____
Director of Technical Services