

The University of Maine
Office of Research Administration
Delegation of Authority Form for Sponsored Projects

This form should be used to delegate authority for chartfield(s) managed by the Office of Research Administration.

Department:

Requested by:

Date:

*Department ID	*Fund Code	Program Code	*Project Code

**Denotes a required field; enter "all" as applicable or use separate page for additional chartfield combinations.*

Name & Title of person responsible for account:

Name & Title of delegated person:

Indicate time frame, if any:

Please select one:

The delegated person listed above has signature authority to approval ALL forms.

Only the following forms are delegated (ex: CTR, subaward invoices, budget reallocations, etc.):

Do you wish to eliminate any prior delegations of authority?

NO YES *If yes, provide name of prior delegated person to eliminate and reason below.*

Name:

Reason:

I have delegated my authority to the person listed above to sign their own name for approving the financial forms listed above. If there are any changes in personnel, I will be responsible for sending a new form to this office. If the person you report to is delegating authority to you, you may not approve any financial disbursements to that individual.

Signature of current responsible person

Signature of newly delegated person

Email to ora@maine.edu upon completion.