

Berea College
Approval Authority Delegation Form

Please use this form to delegate your approval authority signature in the event of your inability to approve check request or purchase orders due to absence.

Department _____

Current Approval Authority _____
Printed Name Signature

Temporary Assignment _____
Printed Name Signature

Start Date _____ End Date _____

Send form to: Cheryl Hinkle
Accounts Payable
CPO 2201