

# CAPITAL APPROPRIATION REQUEST FORM

Name of Project / Equipment \_\_\_\_\_

Anticipated Project Funding (Account Name & GL #) \_\_\_\_\_

Anticipated Project Timing \_\_\_\_\_

Campus Location \_\_\_\_\_

Person Responsible for Project \_\_\_\_\_

Department \_\_\_\_\_

Project Description \_\_\_\_\_

(Attach a separate sheet if additional room is needed) \_\_\_\_\_

Project Justification \_\_\_\_\_

(Attach a separate sheet if additional room is needed) \_\_\_\_\_

Estimated Cost (Attached detailed list of costs) \_\_\_\_\_

Submitted By: \_\_\_\_\_

Date: \_\_\_\_\_

**Project Approved: Yes or No**

\_\_\_\_\_ No additional information required--proceed with project.

\_\_\_\_\_ Approval to request bids. Submit bids along with vendor recommendation and a justification if the lowest bid is not selected. If the bids exceed the original estimated cost, proposal must be resubmitted for approval prior to committing funds.

**Explanation:**

Approval Section	Signatures	Date
PI (for grants only)		
Development Officer - Grants (for grants only)		
Vice President of Requesting Dept		
Vice President for Finance and Administration		
President (if request exceeds \$25,000)		

**Business Office Section**

Capital Appropriation Project Number \_\_\_\_\_

General Ledger Number \_\_\_\_\_

Check # / Voucher # \_\_\_\_\_

Fixed Asset # \_\_\_\_\_

Amount Capitalized \_\_\_\_\_