

CAPITAL APPROPRIATION REQUEST FORM

Name of Project / Equipment _____

Anticipated Project Funding _____

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
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 _____

Purchase Order # _____

Check # / Voucher # _____

Fixed Asset # _____

Amount Capitalized _____