



**UNAUTHORIZED PURCHASE APPROVAL FORM**

Date:

\_\_\_\_\_

Name of Requester:

\_\_\_\_\_

Amount:

\_\_\_\_\_

Date of Invoice/Authorization:

\_\_\_\_\_

Vendor/Supplier Name:

\_\_\_\_\_

Name of Product or Service:

\_\_\_\_\_

Description of the product or service requested:

\_\_\_\_\_

**Authorized By:** (Individual Authorizing Work):

Full Name:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Reason for authorizing work without a PO:

\_\_\_\_\_

Steps that will be taken to ensure the PO will be issued in advance moving forward:

\_\_\_\_\_

**APPROVAL**

(The requisition should be reviewed and approved by the School Chair/Director and VP/Dean)

If Purchase is less than \$25k VP/Dean approval is not required. **\*\* Please note that purchasing reserves the right to reject the issuance of a PO if it does not comply with state purchasing rules\*\***

\_\_\_\_\_  
School Chair/Director

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
VP/Dean

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date