FIN-FRM-008R Signing Authority & Research Reports Access Research Funds



Form Purpose and Instructions:

This form will serve to ADD or REMOVE Signing Authority (Electronic/Manual) and/or Research Reports Access for the Project identified below. One form per Project must be completed and forwarded to Financial Services. There is no limit on the number of individuals to whom Signing Authority and/or Research Reports Access may be granted. The Principal Investigator (Owner) automatically has Signing Authority (Electronic/Manual) and Research Reports Access.

ChartField Information:				or	
(mandatory fields)	Fund	Departmer	nt Project	TRAQ DSS	
Principal Investigator (Owner):					
Employee ID:			Date: (YYYY/MM/DD)		
Name:			Signature:		
Email:					
This form supersedes all previous for Previously Authorized Signatories r			Date: (YYYY/MM/DD)		
○ This form is in addition to all forms	currently on file				
Permission Roles & Descriptions:					
Permission Role	Description				
DELEGATE	Grants user the a	bility to viev	v Project specific financial st	atements and reports in FAST	
SIGNING AUTHORITY		Grants user the ability to view Project specific financial statements and reports in FAST, and authority to approve electronic salary contracts in the HR PeopleSoft contracts system.			
MANUAL SIGNING AUTHORITY			approve expenses processed its, Journal Entries, and Trav		
Authorized Signatories:					
Employee ID:			Date: (YYYY/MM/DD)		
Name:			Signature:		
Email:					
ADD Role(s): Signature Required	0	DELEGATE	○ SIGNING AUTHORITY	MANUAL SIGNING AUTHORITY	
REMOVE Role(s): Signature NOT Re	quired	DELEGATE	SIGNING AUTHORITY	MANUAL SIGNING AUTHORITY	
Employee ID:			Date: (YYYY/MM/DD)		
Name:			Signature:		
Email:					
ADD Role(s): Signature Required	0	DELEGATE	○ SIGNING AUTHORITY	MANUAL SIGNING AUTHORITY	
REMOVE Role(s): Signature NOT Re	auired	DELEGATE	C SIGNING ALITHORITY	MANUAL SIGNING ALITHORITY	

Authorized Signatories: (continued) Employee ID: Date: (YYYY/MM/DD) Name: Signature: Email: **ADD** Role(s): Signature Required DELEGATE SIGNING AUTHORITY MANUAL SIGNING AUTHORITY **REMOVE** Role(s): Signature NOT Required **DELEGATE** SIGNING AUTHORITY MANUAL SIGNING AUTHORITY Employee ID: Date: (YYYY/MM/DD) Name: Signature: Email: **ADD** Role(s): *Signature Required* **DELEGATE** SIGNING AUTHORITY MANUAL SIGNING AUTHORITY **REMOVE** Role(s): Signature NOT Required MANUAL SIGNING AUTHORITY DELEGATE SIGNING AUTHORITY Employee ID: Date: (YYYY/MM/DD) Name: Signature:

Submission Methods:

ADD Role(s): Signature Required

REMOVE Role(s): Signature NOT Required

It is recommended that the preparer keep a copy of this form. If completed online, the form can be saved as a PDF.

DELEGATE

DELEGATE

Electronically:

Email:

For **NEW** Projects related to a **TRAQ DSS**, please submit through **TRAQ**

For Changes to an **EXISTING** Project, email your completed/signed form to finance.security@queensu.ca

SIGNING AUTHORITY

SIGNING AUTHORITY

Notice of Collection:

When complete, this form will contain Personal & Confidential information. This information is being collected under the authority of the Queen's Royal Charter of 1841, as amended. This information will be used to validate and manage signing authorities for Queen's Research Funds.

MANUAL SIGNING AUTHORITY

MANUAL SIGNING AUTHORITY