

FI0420 Appendix D: Contract Signature Authority Request Form

To: David Miller, CFO

From: Allen Bolton

Date: 9/29/23



RE: Signature authority request for Brian Ranger

Question 1: Name of the person who will have contract signature authority if the CFO approves this request:

Name: Brian Ranger

Title: Biological Safety Officer

Question 2: State the types of contracts for which the person may sign if the CFO approves this request:

- Annual registration of the UTK Institutional Biosafety Committee (IBC) with the NIH Office of Science Policy
- Documents or reports related to IBC proceedings, particularly those that may be required by federal regulatory bodies and/or funding agencies
- Notices of safety violations or regulatory non-compliance filed to federal, state, or local agencies
- Notices of safety violations or regulatory non-compliance filed to funding agencies as per codified agency requirements including, but not limited to, the NIH Office of Science Policy
- Documentation related to the receipt, storage, manipulation, transfer, or destruction of select agents as defined by the Federal Select Agent Program (i.e. APHIS/CDC Forms 1-5)
- Biosafety and biocontainment agreement/assurance documents required by various biological repositories or suppliers, including (but not necessarily limited to) ATCC, CDC ARI, NIH, BEI, Addgene, and USDA ARS

Note: Contract signature authority granted by this memo (if approved) expires immediately if the UT employee named in this memo changes positions within UT, or when their employment ends, whichever is earlier.



CFO approval: _____

CC:

Tammie Cole

Blake Reagan

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To: David Miller, CFO

From: Allen Bolton 

Date: 9/29/23

RE: Signature authority request for Allyson Neal

Question 1: Name of the person who will have contract signature authority if the CFO approves this request:

Name: Allyson Neal

Title: Assistant Dean of Graduate Programs, College of Nursing

Question 2: State the types of contracts for which the person may sign if the CFO approves this request: Letters of Agreement for nursing student clinical practice placement.

Note: Contract signature authority granted by this memo (if approved) expires immediately if the UT employee named in this memo changes positions within UT, or when their employment ends, whichever is earlier.

CFO approval: 

CC:

Tammie Cole

Blake Reagan

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RE: Signature authority request for Shelia Swift

Question 1: Name of the person who will have contract signature authority if the CFO approves this request:


Name: Shelia Swift

Title: Exec. Assoc Dean for Academic Affairs & Clinical Assoc Professor, College of Nursing

Question 2: State the types of contracts for which the person may sign if the CFO approves this request: Letters of Agreement for nursing student clinical practice placement.

Note: Contract signature authority granted by this memo (if approved) expires immediately if the UT employee named in this memo changes positions within UT, or when their employment ends, whichever is earlier.

CFO approval: _____



CC:

Tammie Cole

Blake Reagan

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RE: Signature authority request for Phillip Moore


Question 1: Name of the person who will have contract signature authority if the CFO approves this request:

Name: Phillip Moore

Title: Interim Assistant Dean of UG Programs, College of Nursing

Question 2: State the types of contracts for which the person may sign if the CFO approves this request: Letters of Agreement for nursing student clinical practice placement.

Note: Contract signature authority granted by this memo (if approved) expires immediately if the UT employee named in this memo changes positions within UT, or when their employment ends, whichever is earlier.

CFO approval: 

CC:

Tammie Cole

Blake Reagan