

FI0420 Appendix D: Contract Signature Authority Request Form

To: David Miller, CFO

From: Allen Bolton 

Date: 9/29/23

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