



## SIGNATURES

\_\_\_\_\_  
Requestor (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I agree \_\_ do not agree \_\_ with this request.  
Comments:

\_\_\_\_\_  
Requestor's department head (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I agree \_\_ do not agree \_\_ with this request.  
Comments:

\_\_\_\_\_  
Director, Planning, Policy & Training (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I agree \_\_ do not agree \_\_ with this request.  
Comments:

\_\_\_\_\_  
Chief of Staff (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I agree \_\_ do not agree \_\_ with this request.  
Comments:

\_\_\_\_\_  
Chancellor (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date