

UNIVERSITY OF IOWA
DELEGATION OF SIGNATURE AUTHORITY – HUMAN RESOURCE FORMS

If authority to approve human resource transactions is delegated to another person, then it is important that the individual understands the limit of their authority and that they may not further subdelegate this authority. The person delegating signature approval authority is ultimately responsible for the actions of others.

DEPARTMENTAL INFORMATION

Name of DEO: _____

Title: _____ Department: _____

Campus Address: _____ Telephone No.: _____

Name of the Individual to Whom Human Resource Authority is delegated: _____

Telephone No.: _____

AUTHORIZED USES

All HR Forms

Specific HR Forms Only, Please List:

OTHER LIMITATIONS

Authority is granted only during the absence of the signer.

Authority is granted on a case by case basis.

See detailed description on page 2.

I understand and agree to comply with authorized uses and limitations regarding human resource authority delegated to me. Any misuse by me may result in disciplinary action.

The undersigned have read and understand the authorized uses and limitations contained in the Signature Assignment. A periodic review of the authorized uses and limitations is recommended at least annually.

Signature of Person Accepting Delegated Authority

Date

Signature of Person Granting Signature Authority

Date

THE UNIVERSITY OF IOWA

<p>SPECIFIC USES AND LIMITATIONS OF DELEGATED SIGNATURE AUTHORITY</p>
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PERIODIC RECORD REVIEW*

Date of Review	Signature of Person Granting Signatory Authority	Signature of Person Receiving Signatory Authority
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Recommend at least an annual review coinciding with performance review of person holding delegated signature authority. Please update the delegated authority form as staff is hired or terminated.