

# Approval and Authorization Sheet

## Capital Budget Plan

Project Title	_____
Project No.	_____
Department / Unit	_____
Submission Date	_____
Fiscal Year	_____
Total Budget Requested	_____
Brief Project Description	_____
Expected Benefits / Justification	_____

### Prepared By:

\_\_\_\_\_  
Name & Title

\_\_\_\_\_  
Date

### Reviewed By:

\_\_\_\_\_  
Name & Title

\_\_\_\_\_  
Date

### Financial Approval:

\_\_\_\_\_  
Name & Title

\_\_\_\_\_  
Date

### Final Authorization:

\_\_\_\_\_  
Name & Title

\_\_\_\_\_  
Date

## Important Notes

- This form must be completed for all new or additional capital budget requests.
- Ensure all required fields are filled accurately and supporting documentation is attached.
- Signatures from all relevant authorities are mandatory for the budget plan to proceed.
- Keep a copy of this sheet for your department's records.

- Incomplete forms may result in delays or non-approval of the capital request.