

Signature Authority Form Flowchart

New Fund (Grant) Awarded

Change in Delegated Individual(s)
(Hired/Fired/Leave)

Signature Authority Form created by Grant Administrator

Principal Investigator completed the form & signs

Grant Administrator reviews, assigns signature fields, & sends to Delegated Individual(s) if applicable

No Delegated Individual(s)

Delegated Individual 1's signature

Delegated Individual 2's signature
(if applicable)

Delegated Individual 3's signature
(if applicable)

Delegated Individual 4's signature
(if applicable)

Delegated Individual 5's signature
(if applicable)

Delegated Individual 6's signature
(if applicable)

Grant Administrator sends completed form to healthsygrants@southalabama.edu

Grant Analyst reviews & certifies verification

Has a Delegated Individual on the form been given spending authority exceeding \$4,999?

No.
Notify Grant Administrator of completion

Yes.
Send to HSGAD Executive Director for approval as delegated by the Associate Dean of Research

Approved.
Notify Grant Admin of approval/completion

Not Approved.
Notify Grant Admin of disapproval or more information needed