



## PROVOST'S TRANSMITTAL FORM

**All documents requiring the Provost's approval must first be approved by the appropriate Dean or AVP**

Please print transmittal form on yellow paper and submit to the Provost's Office, Craven 5210.

<b>I-a. Document Information</b>			
Requested by (Initiator):		Dept./College/Unit:	
Staff Contact Name:		Extension:	Date:
Type of Document: <input type="checkbox"/> Budget / Expenditures <input type="checkbox"/> Personnel <input type="checkbox"/> Hospitality <input type="checkbox"/> Other		<input type="checkbox"/> Travel – Domestic <input type="checkbox"/> Travel – International (Note: International travel insurance is required - attach travel insurance application to travel request)	
Action Required: <input type="checkbox"/> For Approval/Signature <input type="checkbox"/> For Review			
Brief summary/description of attached document(s), i.e. travel dates/purpose of trip, hospitality purpose, special consultant work outcome expected , etc:			
<b>I-b. Budget Information</b>			
Budgetary Impact: <input type="checkbox"/> Sufficient Funds Identified		Amount (Current Fiscal Year):	Amount (Next Fiscal Year):
Funding Type: <input type="checkbox"/> Base Budget <input type="checkbox"/> One Time Funds	Funding Source: <input type="checkbox"/> State <input type="checkbox"/> UARSC <input type="checkbox"/> Lottery <input type="checkbox"/> Other		Dept I.D. / UARSC Project #
Please Explain:			
<b>II. For Provost Office Use Only:</b>			
<input type="checkbox"/> Returned due to missing/incorrect information <input type="checkbox"/> Discussed with: <input type="checkbox"/> Reason(s):		Date Stamp:	
<b>III. Provost Office Staff Comments:</b>			
Date Contacted for Pick-up: _____		Copies Required <input type="checkbox"/> Yes <input type="checkbox"/> No	President's Approval Required <input type="checkbox"/> Yes <input type="checkbox"/> No

<http://www.csusm.edu/aa/forms.html>