



<b>FOR INTERNAL USE ONLY</b>	
Application Received	_____
Approver Training	_____
Profile Created	_____
Processed By	_____

## APPROVER PROFILE REQUEST

**New Approver**
                         
  **Change in Current Profile**

APPROVER INFORMATION	HEIRARCHY INFORMATION
----------------------	-----------------------

<p><i>*The name listed must be the LEGAL name of the approver</i></p> <p>First Name _____ MI _____</p> <p>Last Name _____</p> <p>Department Name _____</p> <p>Division Name _____</p> <p>Employee EIN# _____</p> <p>City _____ Zip _____</p> <p>Work Phone _____</p> <p>Email _____</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center; padding: 2px;">NEW PROFILE</th> <th style="width: 50%; text-align: center; padding: 2px;">CHANGES IN CURRENT PROFILE</th> </tr> <tr> <td style="padding: 2px;">                     Division _____                      Program Name _____                      Roll Up Department ID _____                      Additional Department IDs:                      (roll up departments- <b>do not include subdepartments</b>)                      _____                      _____                      _____                 </td> <td style="padding: 2px;"> <p><b>Requested Changes:</b></p>                     _____                      _____                      _____                      _____                      _____                      _____                      _____                      _____                 </td> </tr> </table>	NEW PROFILE	CHANGES IN CURRENT PROFILE	Division _____ Program Name _____ Roll Up Department ID _____ Additional Department IDs: (roll up departments- <b>do not include subdepartments</b> ) _____ _____ _____	<p><b>Requested Changes:</b></p> _____ _____ _____ _____ _____ _____ _____ _____
NEW PROFILE	CHANGES IN CURRENT PROFILE				
Division _____ Program Name _____ Roll Up Department ID _____ Additional Department IDs: (roll up departments- <b>do not include subdepartments</b> ) _____ _____ _____	<p><b>Requested Changes:</b></p> _____ _____ _____ _____ _____ _____ _____ _____				

ASSIGNED CARDHOLDERS	AUTHORIZATION
----------------------	---------------

<p><input type="checkbox"/> Division Approver (all cardholders within the department ID)</p> <p><b>Assign Individual Cardholders (list below)</b></p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p><b>Remove Individual Cardholders (list below)</b></p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p> <p>Cardholder _____</p>	<p>Authorized by _____</p> <p>Position _____</p> <p>Signature: _____ Date _____</p> <p>COMMENTS:</p>
--	--