General Purpose Budget Pre-Approval Request Form

Requestor Information

Name: _____ Date: _____

Account you are requesting funding from: _____

I am requesting funds in the total amount* of $ _____ for the following list of items:

The business purpose in alignment with:

- ☐ **Academic Programs**
  - ☐ Guest Speaker Honoraria
  - ☐ Keynote Speaker Honoraria
- ☐ **Research** (Materials and Supplies)
- ☐ **Clinical Practice**
- ☐ **Workplace Operations** (Materials and Supplies)
- ☐ **Student Support & Engagement**
  - ☐ Orientation, Commencement, and Milestone Events
  - ☐ Recognized Student Organization Events (approved funding from student fees)
  - ☐ Recruitment, Retention, or Career Development Events
- ☐ **Development Initiatives**
  - ☐ Alumni Engagement
  - ☐ Donor Engagement
  - ☐ Advancement Purposes
- ☐ **Promoting Healthy Workplace Environments**
  - ☐ Employee Recognition Awards
  - ☐ Chan Division Anniversary of Service
  - ☐ Morale Initiative
  - ☐ Community Stakeholder
  - ☐ Recognitions/Award
- ☐ **Professional Development & Strategic Planning**
  - ☐ Town Hall/Full Division Meeting
  - ☐ Workshop/Inservice
  - ☐ Academic retreat/off-site meeting
  - ☐ Strategic Planning Event
- ☐ **Gift** ($100 maximum)
  - ☐ Retirement Gift
  - ☐ Sympathy/Bereavement Gift
  - ☐ Guest Speaker/Keynote Gifts
  - ☐ Other
- ☐ **Other** _____

Provide description/rationale for ALL expenses listed in any category above:

Supplemental Expenditures Policy Attestation

Updated August 2026

Please review the USC Supplemental Expenditures Policy. To ensure compliance and timely processing, requestors must attest to having read the policy and confirm that the purpose of the event/expenditures aligns with the approved categories outlined in the policy (e.g., student events, recognition events, development events, etc.).

☐ *I attest that I have reviewed the Supplemental Expenditures Policy and that the purpose of this request is in compliance with the policy's approved event categories.*

If you have any questions, please review the policy link above before submitting.

Cost Containment

USC requires consideration of cost containment in the planning and approval of events and expenditures.

☐ *I attest that I have considered cost containment efforts in the selection of venue, vendor, and itemized expenses for this request.*

Approvals: Associate Chair to complete the following section:

Approval:

☐ Yes Total amount approved: $ _____ ☐ No Reason denied: _____

Other comments: _____

Associate Chair Name: _____

_____ _____

Associate Chair signature Date

Associate Dean to complete the following section:

Approval:

☐ Yes Total amount approved: $ _____ ☐ No Reason denied: _____

Other comments: _____

Associate Dean and Chair Signature:

_____ _____

Dr. Grace Baranek signature Date