

AUSTIN PEAY STATE UNIVERSITY
Agency Funds New Account and/or Signature Card
International Education

APSU is hereby authorized to serve as custodian for monies deposited on behalf of the following individual/organization. APSU assumes no liability for expenditures not within the purpose intended for this account.

We are authorized to make payments/withdrawals with the approval of the current responsible person(s) only. If there is a change in said person(s), a new signature card must be completed and returned to the Business Office before future payments/withdrawals will be processed.

Date: ____/____/____

Account No. Assigned: 8 ____ ____ ____ ____

Name of Individual/Organization: _____

Address (Campus): _____

Other: _____

Purpose of Account: _____

Duration of Account: From _____ To _____

Dispensation of funds remaining after ending date: _____

Campus Coordinator: _____
printed name signature

Coordinator of International Education: _____
printed name signature

Assistant Vice President for Academic Affairs: _____
printed name signature

Duration of Responsibility: _____