Approving Official Update

Department Name:	Date:	
Submitted by:	Phone #:	
Former Approving Official:	Former Alternate Approver:	
Print Name:		
Signature:		
New Approving Official:	New Alternate Approver:	
Print Name:		
Email address:		
Signature:		
Cardholder(s) under New Approving Official:		
1	5	
2	6	
3	7	
4	8	

EMAIL COMPLETED FORM TO:

Celia Gonzalez (cegonzalez@mail.fresnostate.edu) & Antoinette Castanon (acastanon@mail.fresnostate.edu)