

**Individual Membership Dues - Payment Authorization Form
College of Engineering
Academic Year 2017-2018**

Name:

Organization(s) (Please list all professional memberships on this form):

Source of Funds (List Index number and amount, only overhead return and start-up funds may be used):

Description (How do these memberships benefit the individual and USU?):

Signature

Date

Department Head Signature

Date

Dean Signature

Date