|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Delegator information** | |  |  | | --- | --- | | Name |  | | Position |  | | Institution |  | | Email |  | | Telephone |  | |
|  | |
| ***Type of request***  *Select one of the options* | |  |  | | --- | --- | |  | Add delegation (*complete Sections II and V only*) | |  | Revoke delegation (*complete Sections III and V only*) | |  | Change delegation (*complete Sections IV and V only*) | |  | Add, revoke or make changes to a sub-delegation *(also complete section V)* | |
|  | |
| **II. Add New Delegation**  *Delegated powers*  *Please list all delegations and reference where appropriate the relevant section of the Financial Regulations*    *Sub-delegations*  *An additional form must be completed for any sub-delegations and approval of HOI obtained* | |  |  |  |  | | --- | --- | --- | --- | | Name of Delegatee |  | | | | Position |  | | | | Institution |  | | | | Effective date of delegation |  | Expiration date of delegation |  |      |  |  |  | | --- | --- | --- | | **Delegated powers and authority** *e.g. Authority to Sign Contracts (Fin Regs 2012,subsection 6)* | **Scope and limitations** *e.g. GBP limits, dual signatures, approvals required* | **Sub-delegations allowed-Y/N?** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |

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| **III. Revoke Existing Delegation**  *Enter the details for individual to whom the delegation was made.* | |  |  | | --- | --- | | Name of Delegatee |  | | Position |  | | Institution |  | | Effective date of revocation |  | | Description of delegation to be revoked |  | |
|  | |
| **IV. Change scope of existing delegation** | |  |  | | --- | --- | | Name of Delegatee |  | | Position |  | | Institution |  | | Effective date of change |  | | Existing delegation |  | | Required change |  | |
|  | |
| **V. Signatures**  *Must always be completed* | |  |  | | --- | --- | | Delegator signature |  | | Date |  | |
|  |  |
| *Complete when adding new or changing existing delegations* | *By signing below, I accept full responsibility for the delegation of authority granted herein and agree to comply with the limitations on such authority and the University of Cambridge Financial Regulations. Any misuse of delegated authority by me may result in disciplinary action.*   |  |  | | --- | --- | | Delegatee signature |  | | Name |  | | Date |  | |
|  |  |
| *Complete when revoking delegations* | *I understand that the delegation authority previously granted has now been revoked as detailed above. Any misuse of delegated authority by me may result in disciplinary action.*   |  |  | | --- | --- | | Previous Delegatee signature |  | | Name |  | | Date |  | |
|  | |
| **VI Approval of sub-delegations** *The HOI must approve all new sub-delegations and any changes to or revocations of existing arrangements.* | |  |  | | --- | --- | | Approver title |  | | Signature |  | | Name |  | | Date |  | |