



Modify Authorized Signatory List

*required information

*Department Name _____

ADD: Name _____

Primary

Alternate

(If adding a Primary Signatory, the existing Primary Signatory will be re-assigned as an Alternate Signatory, as only one Primary Signatory can be accommodated.)

REMOVE: Name _____

(When removing a Signatory, please make sure there is a replacement Signatory added, unless the Department already has a Primary and Alternate Signatory.)

PLEASE NOTE: The new Authorized Signatory will need to attend a Coeus Routing and Approval training course before being able to approve any proposals in Coeus. For more information concerning training dates and information, please e-mail coeushelp@albany.edu.

Your Information

*Name _____

*Department _____

*Title _____

*Phone _____

*E-mail _____