

APPLICATION FOR NEW SUBSCRIPTION/MEMBERSHIP

Department _____ Date _____

Name of Requestor _____ Account No. _____

I. Name of Organization or Periodical _____

Check One: Membership () Subscription ()

II. Annual Cost: \$ _____ Are budgeted funds available to cover the proposed cost? Yes () No ()

III. Memberships necessary to maintain or enhance an employee's professional status (e.g. American Institute of Certified Professional Accountants or Bar membership dues) should be considered the responsibility of the employee and the association dues considered a personal expense.

Is Membership/Subscription INSTITUTIONAL () or INDIVIDUAL ()

If the Membership/Subscription is requested in the name of an individual, certify that:

A. The organization does not permit institutional Memberships/Subscriptions:

Signature _____

- Documentation *must be attached* to be considered.

B. There is a significant monetary savings to the University:

Amount Saved: \$ _____

Signature _____

- Attach either a letter from the organization OR statement from website. Documentation *must be attached* to be considered.

IV. While exceptions may be granted, memberships necessary to maintain or enhance an employee's professional status should be considered the responsibility of the employee and the association dues considered a personal expense. Please explain why this individual membership should *NOT* be considered a personal expense. Provide examples of how Middle Tennessee State University would benefit from this expense *IF* approved. (Attach extra sheets if necessary)

V. Statement of departmental need and utilization, and the goals and nature of the organization or periodical. (Attach extra sheets if necessary)

VI. If a periodical, is it available in the Library? Yes () No ()
If yes, state why this publication is needed in the department:

Vice President Approval _____ Date _____