## THE UNIVERSITY OF WEST FLORIDA REQUEST FOR APPROVAL TO PAY MOVING EXPENSES

This form last reviewed/updated: 05/15/2018

TO: THE UNIVERSITY OF WEST FLORIDA PROCUREMENT & CONTRACTS, BLDG. 24	0W From	Dept		
Requisition Number		_ Contact:		
NAME OF EMPLOYEE OR A	PPI ICANT MOVING		BEG. [	DATE OF EMPLOYMENT
		-	2012	
Class Title		Pay Plan		
Home Phone No.		Work Phone No.		
Moving From City/State		Moving To City/State		
TYPE OF APPOINTMENT:				
Original Pro	omotion	Reassignment	Demotion	Transfer
COST TO THE STATE UNIVERSITY SYSTEM		payment in connection with	this move is:	
The cost of this move is : \$		Sufficient budg	eted funds are availa	ble for this expense.
The move will be made on or about the dat	e of			
NOTE: Approval shall be for the move to take pla advised that this payment is limited to the packir weight will be approved unless any of these restr the approved cost and if the hiring department a does not approve, the person moving will be res	ng, shipping, and sto rictions is specifically approves, a revised re	rage of household goods or a r waived by the chief administra quest must be submitted for a	nobile home and no m ative office of UWF. If th	ore than 15,000 pounds gross ne cost of the move exceeds
Hiring Dept. Authority	Date	Divisional	Vice President	Date
ACTION TAKEN (SELECT ONE):				
APPROVED - Up to 15,000 p	oounds.	APPROVED - In exc	ess of 15,000 pound	s.
DISAPPROVED				