



TEXAS TECH UNIVERSITY
College of Human Sciences™

Technology Services

Departmental Printing Approval Form

Date:

Department Name:

Department Business Manager:

Person Printing:

FOP:

Printing Reason:

Signature: _____

Please deliver this form to the Technology Services Office at the time of printing.

This form grants permission for the above person to print using the above FOP for the reason stated above. By signing this form, you agree for this FOP to be debited. At the end of each month an email will be sent to the department business manager with the total amount charged to the FOP. This form will be used for the Departmental IV approval.

FOR HUMAN SCIENCES DEPARTMENTAL USE ONLY

Number of Prints/Total Price: