

DELEGATION OF AUTHORITY

I \_\_\_\_\_, \_\_\_\_\_ make the following  
(Full Name) (Title)  
delegation of my authority to commit the University of Notre Dame and its resources pursuant  
to the [Operational Delegation of Authority](#)

<u>Name of Employee &amp; Title</u>	<u>Amount of Authority</u>	<u>Employee Signature</u>

This authority is effective immediately until August 1, 2012, unless it is changed, renewed or  
revoked earlier. This authority does not change the requirement that the execution of contracts,  
deeds, agreements and other legal documents must be reviewed and approved by the Office of  
General Counsel per the policy of that office.

\_\_\_\_\_  
(Signature)

Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Scope of Authority:** If applicable, please list below any way in which this authority is limited,  
e.g., by type of contract that can be signed, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Submit this signed form to both:**

Drew Paluf, Associate Vice-President and Controller, 805 Grace Hall

Marianne Corr, Vice-President and General Counsel, 203 Main Building