COMPUTER SCIENCE

Authorization for Academic/Teaching Support

Date of Request: _____

Requestor Name: _____

Requestor Title:_____

Requestor Signature: _____

Order Details

1. Expense Description and Academic Purpose:

2. Expense Justification:

3. If Applicable, indicate where the item(s) will be stored and/or located:

Approver Name: Julia Hirschberg_____

Approver Title: Computer Science Department Chair_____

Approver Signature:_____

Date of Approval: _____

Note: The average lunch cost per TA should not exceed $8

Updated.1.25.2017..Columbia University – Department of Computer Science