



Office of Research, Grants, and Sponsored Programs

Gift Card Request Form

This form must be completed and submitted to the ORGSP Post-Award Manager for review and forwarded to the Chief Financial Officer (CFO) or designee for approval prior to purchase of any gift cards.

Requester Information

Name: _____

Title/Role: _____

Department: _____

Email: _____

Phone: _____

Project Information

Project Title: _____

Grant/Project Code: _____

Principal Investigator/Project Director: _____

Gift Card Request Details

Purpose of Gift Cards: _____

Number of Gift Cards Requested: _____

Amount per Gift Card (not to exceed \$25): _____

Total Requested Amount: _____

Approvals

PI/PD Signature: _____ Date: _____

ORGSP Post-Award Manager Approval: _____ Date: _____

CFO/Designee Approval: _____ Date: _____