

Western University of Health Sciences
BUDGET COORDINATOR AUTHORIZATION FORM
Operating, Capital and Salary Budget
Fiscal Year 2014 / 2015

*Please check the necessary boxes to indicate user access.

| Dean / Director / Vice President | Organization Number | Organization Name | Designated Budget Coordinator | Workday | W Drive Budget Folder <u>WITHOUT</u> Salary Access | W Drive Budget Folder <u>WITH</u> Salary Access |
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