DELEGATION OF SIGNATURE AUTHORITY

By: Barbara E. Wolfe  
Provisional Executive Vice President for Academic Affairs  
Date: 06/30/2023

I, Barbara E. Wolfe, in my capacity as Provisional Executive Vice President for Academic Affairs (the “Authorized Signatory”), hereby delegate to each individual holding the title of Area Coordinator (the “Delegates”), my authority under the University of Rhode Island Policy on Approval and Execution of Contracts and Other Binding Documents as described herein (the “Delegated Authority”).

A. Scope of Delegation

The Delegates are authorized to review, approve, and execute the following type(s) of Contracts and/or Other Binding Documents:

Appointment letters for part-time faculty

B. Limitations

1. The Delegated Authority is granted with the following limitations:

☐ Authority is granted only during the absence of the Authorized Signatory

☐ Authority is limited to Contracts and Other Binding Documents involving a total financial obligation or exposure of $              or less

☐ Authority is limited to Contracts and Other Binding Documents with a duration that does not exceed

2. The Delegated Authority may not be sub-delegated by the Delegate.

C. Term of Delegation

1. The Delegated Authority will become effective on: 07/01/2023

2. The Delegated Authority will remain in effect until the earlier of:

   (a) when it is expressly revoked by me or my successor;
   (b) it expires on the June 30 next succeeding the effective date of the Delegated Authority; or
   (c) the following date:

The undersigned have read and understand the authority and limitations contained in the Policy on Approval and Execution of Contracts and Other Binding Documents and this Delegation of Signature Authority.

Barbara Wolfe  
Barbara Wolfe (Jul 3, 2023 10:12 EDT)

Signature of Authorized Signatory  
Date: 07/03/2023

Initials of Individual Completing this Form: Lou Ann Diomandes  
Lou Ann Diomandes (Jun 30, 2023 12:02 EDT)

Policy on Approval and Execution of Contracts and Other Binding Documents  
Form 1 (Rev. 6-23)
DELEGATION OF SIGNATURE AUTHORITY

By: Barbara E. Wolfe
Provost/Executive Vice President for Academic Affairs

Date: 06/30/2023

I, Barbara E. Wolfe, in my capacity as Provost/Executive Vice President for Academic Affairs (the “Authorized Signatory”), hereby delegate to each individual holding the title of Associate Dean and Interim Associate Dean (the “Delegates”), my authority under the University of Rhode Island Policy on Approval and Execution of Contracts and Other Binding Documents as described herein (the “Delegated Authority”).

A. Scope of Delegation

The Delegates are authorized to review, approve, and execute the following type(s) of Contracts and/or Other Binding Documents:

Appointment letters for part-time faculty

B. Limitations

1. The Delegated Authority is granted with the following limitations:

☐ Authority is granted only during the absence of the Authorized Signatory
☐ Authority is limited to Contracts and Other Binding Documents involving a total financial obligation or exposure of $ ___________ or less
☐ Authority is limited to Contracts and Other Binding Documents with a duration that does not exceed ___________

2. The Delegated Authority may not be sub-delegated by the Delegate.

C. Term of Delegation

1. The Delegated Authority will become effective on: 07/01/2023

2. The Delegated Authority will remain in effect until the earlier of:

   (a) when it is expressly revoked by me or my successor;
   (b) it expires on the June 30 next succeeding the effective date of the Delegated Authority; or
   (c) the following date:

The undersigned have read and understand the authority and limitations contained in the Policy on Approval and Execution of Contracts and Other Binding Documents and this Delegation of Signature Authority.

Signature of Authorized Signatory
Date: 07/03/2023

Initials of Individual Completing this Form: Lou Ann Diamantopoulou

Policy on Approval and Execution of Contracts and Other Binding Documents
Form 1 (Rev. 6-23)
DELEGATION OF SIGNATURE AUTHORITY

By: Barbara E. Wolfe  Provost/Executive Vice President for Academic Affairs
Date: 06/30/2023

I, Barbara E. Wolfe, in my capacity as Provost/Executive Vice President for Academic Affairs (the “Authorized Signatory”), hereby delegate to each individual holding the title of Chair, Vice Chair, Co-Chair (the “Delegates”), my authority under the University of Rhode Island Policy on Approval and Execution of Contracts and Other Binding Documents as described herein (the “Delegated Authority”).

A. Scope of Delegation

The Delegates are authorized to review, approve, and execute the following type(s) of Contracts and/or Other Binding Documents:

Appointment letters for part-time faculty

B. Limitations

1. The Delegated Authority is granted with the following limitations:
   - Authority is granted only during the absence of the Authorized Signatory
   - Authority is limited to Contracts and Other Binding Documents involving a total financial obligation or exposure of $ or less
   - Authority is limited to Contracts and Other Binding Documents with a duration that does not exceed
2. The Delegated Authority may not be sub-delegated by the Delegate.

C. Term of Delegation

1. The Delegated Authority will become effective on: 07/01/2023
2. The Delegated Authority will remain in effect until the earlier of:
   (a) when it is expressly revoked by me or my successor;
   (b) it expires on the June 30 next succeeding the effective date of the Delegated Authority; or
   (c) the following date:

The undersigned have read and understand the authority and limitations contained in the Policy on Approval and Execution of Contracts and Other Binding Documents and this Delegation of Signature Authority.

Barbara Wolfe  Provost/Executive Vice President for Academic Affairs  06/30/2023

Signature of Authorized Signatory
Date: 07/03/2023

Initials of Individual Completing this Form: Lou Ann Diomandes
DELEGATION OF SIGNATURE AUTHORITY

By: Barbara E. Wolfe  
Provost/Executive Vice President for Academic Affairs

Date: 06/28/2023

I, Barbara E. Wolfe, in my capacity as Provost/Executive Vice President for Academic Affairs (the “Authorized Signatory”), hereby delegate to each individual holding the title of Dean (the “Delegates”), my authority under the University of Rhode Island Policy on Approval and Execution of Contracts and Other Binding Documents as described herein (the “Delegated Authority”).

A. Scope of Delegation

The Delegates are authorized to review, approve, and execute the following type(s) of Contracts and/or Other Binding Documents:

B. Limitations

1. The Delegated Authority is granted with the following limitations:

   ☐ Authority is granted only during the absence of the Authorized Signatory

   ☐ Authority is limited to Contracts and Other Binding Documents involving a total financial obligation or exposure of $________ or less

   ☐ Authority is limited to Contracts and Other Binding Documents with a duration that does not exceed ____________

2. The Delegated Authority may not be sub-delegated by the Delegate.

C. Term of Delegation

1. The Delegated Authority will become effective on: 07/01/2023

2. The Delegated Authority will remain in effect until the earlier of:

   (a) when it is expressly revoked by me or my successor;

   (b) it expires on the June 30 next succeeding the effective date of the Delegated Authority; or

   (c) the following date: ____________

The undersigned have read and understand the authority and limitations contained in the Policy on Approval and Execution of Contracts and Other Binding Documents and this Delegation of Signature Authority.

Barbara Wolfe  
Provost/Executive Vice President for Academic Affairs  
06/28/2023

Signature of Authorized Signatory  
Date: 07/03/2023

Initials of Individual Completing this Form: Lou Ann Diomande

Policy on Approval and Execution of Contracts and Other Binding Documents  
Form 1 (Rev. 6-23)
DELEGATION OF SIGNATURE AUTHORITY

By: Barbara E. Wolfe
Date: 06/30/2023

I, Barbara E. Wolfe, in my capacity as Provost/Executive Vice President for Academic Affairs (the “Authorized Signatory”), hereby delegate to each individual holding the title of Director and Interim Director (the “Delegates”), my authority under the University of Rhode Island Policy on Approval and Execution of Contracts and Other Binding Documents as described herein (the “Delegated Authority”).

A. Scope of Delegation

The Delegates are authorized to review, approve, and execute the following type(s) of Contracts and/or Other Binding Documents:

Appointment letters for part-time faculty

B. Limitations

1. The Delegated Authority is granted with the following limitations:

☐ Authority is granted only during the absence of the Authorized Signatory

☐ Authority is limited to Contracts and Other Binding Documents involving a total financial obligation or exposure of $ ______ or less

☐ Authority is limited to Contracts and Other Binding Documents with a duration that does not exceed ______

2. The Delegated Authority may not be sub-delegated by the Delegate.

C. Term of Delegation

1. The Delegated Authority will become effective on: 07/01/2023

2. The Delegated Authority will remain in effect until the earlier of:

   (a) when it is expressly revoked by me or my successor;
   (b) it expires on the June 30 next succeeding the effective date of the Delegated Authority; or
   (c) the following date:

The undersigned have read and understand the authority and limitations contained in the Policy on Approval and Execution of Contracts and Other Binding Documents and this Delegation of Signature Authority.

Barbara Wolfe
Signature of Authorized Signatory
Date: 07/03/2023

Initials of Individual Completing this Form: Lou Ann Diomandes