## **Arkansas Tech University** Move Request Processing Form

Instructions: Fill out the fields below in their entirety. Gather the required signatures. Note: OIS and FAMA must sign before the Vice President for Administration and Finance. After all the signatures are complete return the form to FAMA. Requestor will contact OIS for a ticket number. If this request is for multiple people, n and their n e.

Check this box if this reque	est is for multiple employees.	
	The state of the s	
equestor (person moving):		
Moving From:	Moving To:	
e-mail address:		
	OIS Ticket No.:	
Doguestor Dhone No	Wish to Move Phone No.:  Circle One	Yes / No
Index:	Account:	
Fund:	Program:	
Organization:		
Required Signatures		
Department Head:	Date:	
Vice President:	Date:	
FAMA:	Date:	
Dublic Cofety	Date:	
Vice President of A&F:	Date:	
or Office Use Only		
FAMA WO:	Date Received at FAMA:	
OIS Ticket confirm:		