

Tracking # \_\_\_\_\_

**University of Tennessee, Knoxville**

**Fiscal Policy 715 – Entertainment Prior Approval Form**

The object of Fiscal Policy 715-Entertainment is to provide policies and procedures on the payment and reimbursement of entertainment expenses. The policy outlines situations where it is appropriate for entertainment expenses to be paid by the university. **In addition to the policies outlined in Fiscal Policy 715, the Knoxville campus requires prior approval for entertainment expenses of \$500.00 or more. Please complete the following information and submit from the Department Head through the appropriate College/Division approval to the Vice Chancellor for Finance & Administration, 407 Andy Holt Tower, Campus #0141.**

**If a contract is required to be signed for this event, please process in accordance with Fiscal Policy FI0420.**

**NOTE: Purchases for entertainment purposes are subject to all purchasing policies, including bid limits.**

Please provide in the box below: Purpose of the event relating to entertainment expenses such as meals/food provided for events such as luncheons, dinners, retreats, receptions, etc. and include why the expense is an appropriate university expense:

Name of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Estimated Number of Attendees: \_\_\_\_\_ Estimated Cost per Attendee: \_\_\_\_\_ Estimated Cost of Event: \_\_\_\_\_

Funding Source for Expenses: Department Name: \_\_\_\_\_ Cost Ctr. /WBS Element: \_\_\_\_\_

GL Code: 446200 – Primarily University Faculty, Staff & Students  
449200 - Hospitality Events for Non UT Employees & Students

The request will be returned via email to the unit with the approval signatures or an explanation for denial. If the request is approved, when the invoice is entered or the reimbursement request prepared, include the tracking number assigned by the Finance & Administration office in the upper left hand corner of this form.

Questions regarding the supplemental policy on Entertainment should be directed to the Budget & Finance Office at 865-974-4204.

\_\_\_\_\_  
Requestor Name Phone Number Email Address (for return of form) Date

\_\_\_\_\_  
Department Head (Signature) **REQUIRED** Date Dean or Vice Chancellor (Signature) Date

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Vice Chancellor for Finance & Administration or Designee Date Revised 2/10/12