



IUP Agreement Routing Form

Date: _____

Title _____

SIGNATURES (checked ones are required):

- Required
- _____ Date _____ Unit Leader _____
 - _____ Date _____ Unit Leader _____
 - _____ Date _____ Provost and Vice President for Academic Affairs
 - _____ Date _____ Vice President for Administration and Finance
 - _____ Date _____ Vice President for Student Affairs
 - _____ Date _____ Vice President for University Relations
 - _____ Date _____ Assistant Vice President for International Education and Global Engagement
 - _____ Date _____ President



LAST ONE RETURN TO: Timothy Mack, Dean, School of Graduate Studies and Research, 129 Stright Hall