**Control No.**

**Date:**

**SEND-OFF TOKEN REQUEST FORM**

*(for retirees who opt not to have send-off party)*

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **I. RETIREE** | | | | | | | | | | | |
| Name of Retiree: | | | | | | | Position: | | | | |
| Department/Unit/College: | | | | | | | Retirement Date: | | | | |
| **II. FUNDS AVAILABILITY** (Please tick the appropriate box) | | | | | | | | | | | |
|  | Funded (please indicate amount) | | | | | | | | | | |
| Not funded (please indicate amount)  Not applicable\* | | | | | | | | | | | |
| **III.** **BREAKDOWN OF BUDGET** | | | | | | | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | **ITEM** | **QUANTITY** | **UNIT COST** | **TOTAL COST** | |  | Customized Cake |  |  |  | |  | Wine |  |  |  | |  | Bouquet |  |  |  | |  | Simple meal for retiree/s’ family |  |  |  | |  | OTHERS |  |  |  | | | | | | | | | | | | |
| **IV. ATTACHMENTS** (may tick more than one) | | | | | | | | | | | |
| Retirement Letter  Request Letter  Others:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| No  REQUESTED BY: | |  |  |  |  |  | |  |  |  |  |
|  | |  |  |  |  |  | |  |  |  |  |
| Performance Management Unit Head: | | | | | | | | |  |  | |
| Signature over Printed Name | | | | | | | | | | | |
| **RECOMMENDING APPROVAL:** | | | |  |  |  | |  |  |  |  |
| OHRDM Director Finance Office Director | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Vice President (AF/AA/RDE) | | | | | | | | | | | |
| **APPROVED:** | | | | | | | | | | | |
|  | | | | | | | |  | | | |
| University President | | | | | | | | | | | |