



Purchase Request Form

Send to [cos.financebusiness@ucf.edu](mailto:cos.financebusiness@ucf.edu). See page 2 for full instructions.

\*Requestor \_\_\_\_\_ \*Date of Request \_\_\_\_\_

\*Department/School/Center \_\_\_\_\_

\*Ship to (street address or building name) \_\_\_\_\_

\*Deliver to (room number) \_\_\_\_\_ \*Benefit to UCF: \_\_\_\_\_

\*Funding Source(s):

\*Purpose/Comments to Approver:

\*Supplier Name \_\_\_\_\_

Supplier Website or Phone Number \_\_\_\_\_

Quote Number (please attach quote) \_\_\_\_\_

Yes  No \*Hazardous Materials?

Yes  No \*Related to Fabricated Equipment/Asset Build?

If yes, include the PJ number in the box to the right.

If yes, please answer: Addition?  Yes  No Replacement?  Yes  No

Item	Part #	Qty	Unit	Description/URL	Unit Price	Total Price
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
					<b>TOTAL</b>	

Please attach additional page(s) if needed.

**Budget Review** if requested

\_\_\_\_\_ Budget Analyst

\_\_\_\_\_ Post Award

Please add complete worktags below

**Signatures**

\_\_\_\_\_  
Approver Date

\_\_\_\_\_  
Chair/Director Date


**Purchase Request Form Instructions**

Completed forms should be emailed to [cos.financebusiness@ucf.edu](mailto:cos.financebusiness@ucf.edu) for processing.

**Note:** Faculty and staff entering Requisitions into Workday are not required to use this form. The Requisition takes the place of this form. Faculty and staff using this form to request reconciliation of their Expense Card purchases **must** attach a paid receipt or invoice showing \$0 balance.

Students should use this form and upload as an attachment in Workday if submitting their own Requisition.

1. Enter your name
2. Enter today's date
3. Choose your Department, School, or Center from the drop down list. If it is not listed, select "other" and enter your area in the adjacent box.
4. Enter the shipping address or building name for delivery and room number. Please do not provide your office number if delivery personnel must pass through locked doors to access your office.
5. Enter the Benefit to UCF and Purpose. These are required fields regardless of what funding is being used.
6. Enter the funding that will pay for the purchase. Please provide Workday worktags if possible. If you are unsure, please describe the account.
7. Enter the supplier's name. Please also include website, quote number, and sales representative contact information if applicable. Attach the quote to the emailed request with the signed form.
8. Select whether any items are Hazardous Materials\* or part of Fabricated Equipment/Asset Build\*\*.
9. Enter at least one item you would like to purchase. The price total will auto calculate. Please specify the unit as well as the quantity, i.e. each, case, dozen, set of 10, etc.
10. Please sign if you have spending authority on the account used. If you do not, please obtain the signature before submitting.
  - a. A student should ask their PI or supervisor to sign the form.
  - b. If your area requires Chair or Director approval for purchases, please route to them for approval as well.
11. Once the form is received by the COS Finance Budget Business Center it will be routed for budget review if needed. Please leave this area blank.



**College of Sciences**

Purchase Request Form

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Reset Form

1 \*Requestor \_\_\_\_\_

3 \*Department/School/Center -- select one --  

4 \*Ship to (street address or building name) \_\_\_\_\_

4 \*Deliver to (room number) \_\_\_\_\_

6 \*Funding Source(s):

7 \*Supplier Name \_\_\_\_\_

Supplier Website or Phone Number \_\_\_\_\_

Quote Number (please attach quote) \_\_\_\_\_

8  Yes  No \*Hazardous Materials?

Yes  No \*Related to Fabricated Equipment/Asset Build?

If yes, include the PI number in the box to the right.  
If yes, please answer: Addition?  Yes  No Replacement?  Yes  No

2 \*Date of Request \_\_\_\_\_

5 Benefit to UCF: \_\_\_\_\_

5 Purpose/Comments to Approver: \_\_\_\_\_

Item	Part #	Qty	Unit	Description/URL	Unit Price	Total Price
1						\$ 0.00
2						\$ 0.00
3						\$ 0.00
4						\$ 0.00
5						\$ 0.00
6						\$ 0.00
7						\$ 0.00
8						\$ 0.00
9						\$ 0.00
10						\$ 0.00
11						\$ 0.00
12						\$ 0.00
13						\$ 0.00
14						\$ 0.00
15						\$ 0.00
				<b>TOTAL</b>		\$ 0.00

Please attach additional page(s) if needed.

11 Budget Review if requested

\_\_\_\_\_ Budget Analyst

\_\_\_\_\_ Post Award

Please add complete worktags below

10 Signatures

\_\_\_\_\_  
Approver Date

\_\_\_\_\_  
Chair/Director Date

revised 9/22/23 1

\* **Hazardous Materials** fall into the Spend Categories below and **MUST** be purchased via Purchase Order. Expense cards may not be used.

Spend Category	Spend Category Description
SC0158 Biochemicals	organic compounds
SC0159 Biological Agents	Bio cleaner, Bio Guard

SC0160 Compounds & Mixtures	Chemical Compounds
SC0161 Elements & Gases	Chemical lab use, Chlorine, Element metals, Krypton, Metals, Nitrogen, Noble Gases, Oxygen, Radon
SC0162 Ethanol	Ethanol, Alcohol
SC0163 Explosive Materials	Explosive fuses, Explosive igniters, Explosives, Fireworks, Flares
SC0164 Indicators/Reagents	Reagents, Agents
SC0165 Industrial Use Gases	Ammonia CO2 gas, Chlorinated Mixed Gas, Hydrogen Compound, Hydrogen Sulfide, Industrial Air, Industrial Gases
SC0166 Isotopes-Radioactive	Radioactive Substance, Radioisotope
SC0507 Propellants	Powder gelled high energy propellants
SC0508 Select Agents	Agents
SC0511 Isotopes	Isotope deuterated alpha beta gamma sources

**\*\* Fabricated Equipment (Asset Build):** when components are assembled to construct a piece of equipment rather than purchasing a pre-built piece of equipment. These may be funded by grant or non-grant funds. Please contact your Post Award Specialist or Budget Analyst for assistance setting up a new Asset Build. For more information, see

<https://www.research.ucf.edu/documents/PDF/2022/Asset%20Build%20Business%20Process%5b51%5d.pdf>