



# Arizona *BuyWays* New Department/Liaison Application

1. Complete and print the application
2. Obtain all original required signatures: Liaison, Department Head
3. Please mail to:  
University of Arizona  
Procurement & Contracting Services  
Attn: Stephanie O'Donnell or Lucy Soriano  
University Services Annex (USA) Bldg. 300A 5<sup>th</sup> Floor  
Tucson, Arizona 85721

**\*\*PLEASE NOTE: INCOMPLETE APPLICATION CANNOT BE PROCESSED, ALL FIELDS ARE REQUIRED\*\*  
DO NOT FAX FORM, ORIGINAL SIGNATURES REQUIRED**

New Department       New Liaison       Add Liaison "ONLY"       Delete Liaison

Department /Unit Name: \_\_\_\_\_

Department Number: \_\_\_\_\_

I attest that I understand and will perform the duties of the Arizona *BuyWays* Liaison at the University of Arizona as described below and in the Arizona Buyways Responsibilities. I further attest that I will assure that each Approver within my department/unit understands and performs the appropriate duties.

Liaison's Name (*please print*): \_\_\_\_\_

Liaison's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Liaison's email: \_\_\_\_\_ Work Ph. #: \_\_\_\_\_

**As Department/Unit Head or Designee, I authorize participation in the Arizona *BuyWays* program.**

Department/Unit Head (*please print*): \_\_\_\_\_

Department/Unit Head (signature): \_\_\_\_\_ Date: \_\_\_\_\_

Departmental Responsibilities:

General

- >Identify departmental employees who will order through Arizona BuyWays
- >Assure that all employees participating in the program attend training
- >Provide Purchasing with a list of account numbers and approvers on these accounts.

Liaison

- >Function as liaison between your department and E-Purchasing
- >Complete User application and forward to Arizona BuyWays Administrator
- >Submit Change forms if necessary
- >Assure that users are properly trained

Purchasing Use Only:

Liaison List: \_\_\_\_\_ Recorded by: \_\_\_\_\_

Date: \_\_\_\_\_ AZBW Dept. Valid: \_\_\_\_\_