**MEMORANDUM**

DATE: xx/xx/xxxx

TO: Joel Samuels, Dean

 College of Arts & Sciences

FROM:

 Department of Chemistry & Biochemistry

RE: Membership

I request your approval to purchase/renew the following membership or subscription:

Organization Amount Dept/Fund *Account # here*

The purpose of this membership provides benefits to the faculty and students. No personal benefit for Dr. \_\_\_\_\_\_\_\_\_ is received from this organization.

Thank you.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Professional development of faculty |  | Licensure requirements |
|  | Professional development of students |  | Program accreditation requirements |
|  | News pertinent to the field  |  | Student career building |
|  | Learning latest developments in field |  | Disseminating research results |
|  | Disseminating information about UofSC |  | Other: |