



# ACCOUNT ADDITION/CHANGE REQUEST FORM

- CHANGE EXISTING ACCOUNT
- NEW ACCOUNT
- INACTIVATE EXISTING ACCOUNT

(To inactivate, account balances must be \$0.00, and encumbrances must be cleared)

ACCOUNT TITLE \_\_\_\_\_

DEPARTMENT/ADMINISTRATIVE UNIT \_\_\_\_\_

ACCOUNT MANAGER \_\_\_\_\_ CHANGE  YES  NO

ACCOUNT PURPOSE \_\_\_\_\_

### SOURCE OF FUNDS

- State Account
- Federal Grants and Contracts
- State Grants and Contracts
- Capital Improvement
- Foundation Related
- Agency
- Contracts \_\_\_\_\_
- Gifts \_\_\_\_\_
- Other \_\_\_\_\_

### **ADDITIONAL AUTHORIZED SIGNERS**

(Print or Type Name)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **DELETE AUTHORIZED SIGNERS**

(Print or Type Name)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REQUESTED BY \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_  
(Vice President, Dean, Director or Department Chair)

FOR BUSINESS AFFAIRS OFFICE USE ONLY

SETUP BY \_\_\_\_\_

DATE \_\_\_\_\_

Program/Grant/Gift/Project Worktag Number \_\_\_\_\_