ACCOUNT SET-UP SHEET

INSTRUCTIONS: Please fill in the applicable information for the establishment of new accounts or changes on existing accounts. The selected Administrator will receive the monthly reports of the account and will be held responsible for assuring that the data is accurately reported. **Account Administrator must sign form and return to Business Office for processing.**

<table>
<thead>
<tr>
<th>Date Requested:</th>
<th>Account Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator:</td>
<td>Signature:</td>
</tr>
<tr>
<td>Campus Address:</td>
<td>Department FOAPAL (assigned by Business Office)</td>
</tr>
</tbody>
</table>

**SELECT THE APPROPRIATE BOX:**

**SENIOR ADMINISTRATOR:**
- [ ] President
- [ ] Provost
- [ ] Vice President, Admin & Finance
- [ ] Vice President, Univ Adv & Student Srvs
- [ ] Vice President, Enrl. Mnmgt.
- [ ] __________________________

**COLLEGE:**
- [ ] Business Administration
- [ ] Education
- [ ] Fine Arts
- [ ] Health Sciences and Human Services
- [ ] Humanities and Social Sciences
- [ ] Science and Mathematics
- [ ] ______

**SOURCE OF FUNDING (one or more):**
- [ ] Appropriations
- [ ] Federal Grant
- [ ] State Grant
- [ ] Private Gift, Grant
- [ ] Local Funds

*Identify Source:*

__________________________

- [ ] Endowment Income
- [ ] Sales and Service

Provide a concise explanation of the purpose and any restrictions of the account. Attach documentation.