



Requester Name

CWID

Date

Department

Phone #

Department Authorization Name

Authorization Signature \_\_\_\_\_

### Indicate Action Requested:

☐ Create (Section A)

☐ Change (Section B)

☐ Deactivate (Section C)

☐ Multiple (Page 2)

Effective Date

Reason for request

### Section A - Create New Org Unit / Funds Center

Long Description (40 Characters)

Short Description (20 Characters)

Will there be any employees

Will there be funds / grants managed

Supervisor Name (Org Unit Admin)

Supervisor CWID

Parent Org Unit #

Parent Org Unit Name

### Section B - Change Existing Org Unit / Funds Center

Org Unit # being updated

New Org Unit Name (if changing)

New Parent Org Unit # (if changing)

Are you adding funds/grants?

### Section C - Deactivate Org Unit / Funds Center

Org Unit # to be deactivated

### Administrative Use Only

Institutional Reporting Approval \_\_\_\_\_

Date

General Accounting Approval \_\_\_\_\_

Date

Funds Center #

Human Resources Approval \_\_\_\_\_

Date

Org Unit #

### Multiple Org Unit / Funds Center

Parent Org Unit #	<input type="text"/>	Parent Org Unit Name	<input type="text"/>
Long Description (40 Characters)	<input type="text"/>		
Short Description (20 Characters)	<input type="text"/>		
Will there be any employees	<input type="text"/>	Will there be funds / grants managed	<input type="text"/>
Supervisor Name (Org Unit Admin)	<input type="text"/>	Supervisor CWID	<input type="text"/>

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### Administrative Use Only

Funds Center #  Org Unit #

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Long Description (40 Characters)	<input type="text"/>		
Short Description (20 Characters)	<input type="text"/>		
Will there be any employees	<input type="text"/>	Will there be funds / grants managed	<input type="text"/>
Supervisor Name (Org Unit Admin)	<input type="text"/>	Supervisor CWID	<input type="text"/>

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### Administrative Use Only

Funds Center #  Org Unit #

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Long Description (40 Characters)	<input type="text"/>		
Short Description (20 Characters)	<input type="text"/>		
Will there be any employees	<input type="text"/>	Will there be funds / grants managed	<input type="text"/>
Supervisor Name (Org Unit Admin)	<input type="text"/>	Supervisor CWID	<input type="text"/>

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### Administrative Use Only

Funds Center #  Org Unit #

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Long Description (40 Characters)	<input type="text"/>		
Short Description (20 Characters)	<input type="text"/>		
Will there be any employees	<input type="text"/>	Will there be funds / grants managed	<input type="text"/>
Supervisor Name (Org Unit Admin)	<input type="text"/>	Supervisor CWID	<input type="text"/>

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### Administrative Use Only

Funds Center #  Org Unit #

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### Administrative Use Only - Approval for all funds centers / org units

Institutional Reporting Approval _____	Date	<input type="text"/>
General Accounting Approval _____	Date	<input type="text"/>
Human Resources Approval _____	Date	<input type="text"/>