UNIVERSITY OF UTAH
ACTIVITY/PROJECT SET-UP REQUEST

(Return completed form to General Accounting, 403 Park Building)

To be completed by General Accounting:

Activity #	BU	Org ID	Fund	Project

Program Class	Funding Class	Rstd FB	Endowment/Expenditure X-Ref	Accounting Dept. Contact

Requesting department MUST COMPLETE ALL information below:

Date	Originating Individual	Phone # **(7 Digits)**

Short Title **(Limit 30 Characters)**

Long Title **(Limit 126 Characters)**

Responsible Person **(Last Name,First Name MI as appears on PAN form)**	Responsible Person Empl ID

Responsible Person Campus Address (Room & Building)

Location Code (Management Report Mail Location)	Organization Name	Org ID

Employee ID	Liaison Name	Phone # (7 Digits)	Responsible VP Office or College

Send Notification of Setup To: (Name and Address)

Definitions	Select Functional Group	Select Sub-Function (not Fund ChartField)	Definitions
	Scholarships & Fellowships		

Purpose of Activity/Project including restrictions on expenditures. (Must be supported by pertinent correspondence or other documentation as appropriate.)

Specific Source of Revenue - Fund ChartField (For initial and future funding)

I, as responsible person, verify that the above information is complete and that all copies of pertinent correspondence and other supporting documentation have been attached. I accept full responsibility for the Activity/Project and will follow procedures outlined in Section 3 of the Policy and Procedures Manual.

Responsible Person Date

Budget Office or Development Office Date

I, as Dean/Vice President, hereby approve the establishment of the above requested Activity/Project. (If the responsible person is a Dean, the Activity/Project must have the approval of the appropriate Vice President.)

Dean or Vice President Date

Manager, General Accounting Date