

Agency Account: Update Form

Instructions: Please type all required information. Once complete submit to the Controller's Office. This form should be submitted whenever there is a change in information and also at the start of each semester. <u>Deadlines: Fall - Oct. 15th; Spring - Mar. 15th</u> **Hand written forms will not be accepted.**

Date	Account Code :	
Account Name		
-		
	Advisor Information	
Name		
Last Name	First Name	
Department Name		
GSU Address	Contact Number	
Box Number	•	Campus Extension
	Organization Officer Information	
Name of President	Contact Number	Email
Name of Vice President	Contact Number	Email
Name of Treasurer	Contact Number	Email