



Controller's Office • Long Jones Hall • Rm 263

Agency Account Application - Faculty & Staff

Read each section. Fill in the requested information in order. Return to the Controller's Office. Please type into this form.

Attach the completed Authorized Signature Form before submitting.

1) Account Code: **700-** _____ (Controller's Office will assign upon completion)

2) Org/Account Name: _____

3) Purpose of Organization: _____

4) Source of funding: _____

5) Have any group members been associated with an agency account that has been closed within the last year? **YES** **NO**
If yes, give account info and details on why account was closed? _____

6) As officers of this organization we understand that we are responsible for any financial obligations incurred by this organization and for any overdraft in this agency account.

7) **The organization authorizes the university to forfeit any abandoned monies to the Student Organizations Council account. Monies will be deemed abandoned if for three fiscal years, there is no account activity (see Agency Account Policy) and there is no current Account Acknowledgement Form on file with the Controller's Office.**

8) Account Holder Information: Provide contact info for account custodians.

_____	_____	_____
Name	Title	Campus Phone Extension
_____		_____
Email	Signature (must match signature form)	

_____	_____	_____
Name	Title	Campus Phone Extension
_____		_____
Email	Signature (must match signature form)	

_____	_____	_____
Name	Title	Campus Phone Extension
_____		_____
Email	Signature (must match signature form)	

9) Account Correspondence Information

Use the lines below to provide a campus box number where correspondence related to this account can be sent if necessary.

10) We, the account holder, have read and understand the Agency Account Policy. **YES** **NO** Initial Here _____

11) Verification and Approval

This organization has met/fulfilled all requirements and is clear to establish a new account.

Signature - Agency Account Custodian

Date