

Funds Center Request Form

Person Completing Form: _____ Phone No: _____

Suggested Funds Center Number: _____

Suggested Funds Center Name:

Name (Short Name 20 characters): _____

Description(Long Name -40 characters): _____

Superior Funds Center: _____

Responsible Cost Center: _____

Name and Personnel Number of Department Head:

REQUIRED EXPLANATION

Please provide a brief explanation addressing the need and the intended use for the Funds Center. Also, note any additional information that you feel would be relevant and attach any supporting documentation.

Chief Business Officer

University Wide Administration Use Only
Office of Vice Pres. For Budget & Finance

NOTE: In addition to this form, a User ID Request/Change Form should be completed granting access to the new fund center(s). The form can be accessed in IRIS using transaction ZSEDEPTAUTH000. Help documentation for this transaction can be found by clicking "Help" -> "IRIS Help" at the top of the transaction screen. For questions, please contact the user coordinator for your campus.

[Revised 03/2006]