

Organization Description Change Form

Purpose: To update a existing Organization Description.

Contact Information:			
Prepared By		Phone Number	Date
		- ·	
Chart of Accounts:		Organization:	
Current Organization Title:			
Ŭ	(35 Characters-	including spaces)	
New Organization Title:			
	(35 Characters-	including spaces)	
Reason for Change:			
Effective Date:			
Financial Manager:			
Fillaticial Managet.			
Signatures Required:			
Chair		Date	
Dean or Director		Date	
Vice President		Date	
ACCOUNTING USE ONLY			
Default Fund:	Defa	ault Program:	
Dordait Faria.	_ = = =		
Sr. Director Approval		Date	
Entered into Panner By (s	icnoturo)	Date Entere	
Entered into Banner By (signature) Date Entered			