

**RSO FINANCIAL SERVICES – NEW ACCOUNT
DIRECTIONS**

Form #1: Please complete all questions to the best of you knowledge.
Please have your advisor sign at the bottom

Form #2: Please have your advisor fill out lines 2, 3 & 9 and sign on the line.

Please return both forms to Jodi Rogers at the Dean of Students Business
Office, Campus Box 2640

The group's advisor and student officers (if names provided) will be
contacted when the account is open.

**RSO FINANCIAL SERVICES
NEW ACCOUNT FORM**

NAME OF RSO: _____

NAME OF FACULTY / STAFF ADVISOR _____

PHONE _____

UNIVERSITY ID # _____

DEPARTMENT _____

NAME AND POSITION OF OFFICERS:

HAS YOUR ORGANIZATION EVER RECEIVED STUDENT PROGRAM FUNDING?

YES NO

IF NO, DOES YOUR GROUP ANTICIPATE APPLYING FOR FUNDING FROM EITHER THE PROGRAM FUND OR OPPORTUNITY FUND IN THE FUTURE?

YES NO

**WHERE DOES YOUR SELF GENERATED FUNDS COME FROM?
(CHECK ALL THAT APPLY)**

- DUES
- FUNDRAISERS
- DONATIONS
- SALE OF MERCHANDISE
- OTHER (PLEASE SPECIFY) _____

**PLEASE DESCRIBE THE TYPES OF PURCHASES THE GROUP ANTICIPATES?
(THIS ALLOWS FOR THE CORRECT ACCOUNT CODES TO BE SET UP)**

SIGNATURE OF FACULTY/STAFF ADVISOR

Request for New Agency Account

1. Person Requesting Account: _____
2. Person to be Budget Officer: _____
3. UID# of Person to be Budget Officer: _____
4. Title of Account: _____
5. Purpose of Account: _____
6. To be funded by? _____
7. Will the account be used for payroll? _____
8. Types of Expenditures: _____

9. Department of Budget Officer: _____

Date: 9/19/06

Signature of Person to be Budget Officer

Do Not Write Below This Line

Datatel # Fund:	Function:	Unit:
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Payroll # FIAB:	Department:	Cost:
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Functional Class:	Fund Detail:
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Reporting 1	Reporting 2
Reporting 3	Reporting 4

Fiscal Year:

Approved Comptroller _____
Date

Approved Provost _____
Date

Approved Budget Office _____
Date