

SOUTHERN UTAH UNIVERSITY  
**REQUEST FOR NEW PROGRAM ACCOUNT  
OR CHANGE IN OPERATING BUDGET**

Account Number \_\_\_\_\_  
(BLANK IF NEW)

- 1. Name of Program:
- 2. Banner Account Index (if desired; must be six characters or less):
- 3. Person in Charge of Program:
- 4. Person(s) Authorized to Sign Requisitions:
- 5. Person(s) Requiring Banner Finance Access:
- 6. Brief Description of Program\*:
- 7. Duration of Program:
- 8. Budget: Original  Adjustment  (check one)

a. Receipts (summarize by source)\*:

\_\_\_\_\_

Total Receipts \_\_\_\_\_

b. Expenditures:

Salaries \_\_\_\_\_

Wages \_\_\_\_\_

Benefits \_\_\_\_\_

Current Exp. \_\_\_\_\_

Travel \_\_\_\_\_

Capital \_\_\_\_\_

Scholarships \_\_\_\_\_

Overhead \_\_\_\_\_

Total Expenditures \_\_\_\_\_

9. Authorization:

Submitted by: \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_  
DEAN OR DEPT HEAD

Date: \_\_\_\_\_

\_\_\_\_\_  
PRESIDENT OR VICE PRESIDENT

Date: \_\_\_\_\_

\*Attach approved grant, contract or authorization document, if applicable.