



Request for Establishment of ORG

Fiscal Year 20__

New Request **Change Request**

If Change Request, please provide Org Number _____

Title of Org (35 Character Maximum Length) _____

Div/Dept that Org Rolls Up To: _____

Explain the need for this new Org or change in Org structure (Please note, Orgs should only be created to enable staff delineation and not to create separate budgets).

Department Head _____ Administrative Manager _____

Is there an existing Org Chart for this Department? Yes___ No___ (If yes, please attach chart.)

How many employees will be assigned to this Org? _____

Mail Code _____ Check Location _____

NOTE: Funds must be in place prior to expenditure transactions.

Primary Default Fund (Must be Completed) _____

***If the new Org is funded, please attach the Budget Reallocation form or Modification showing which Fund/Org combination will be funding it.**

Request Prepared by: _____ Date: _____

Responsible Person's Signature: _____ Date: _____

Fiscal Officer's Signature: _____ Date: _____

To Be Completed by Human Resources

Predecessor Org Number: _____ New Org Number: _____

UHP Primary Unit: _____ HR Approval: _____

To be Completed by Budget

Fund Hierarchy: _____ Budget Approval: _____

To be Completed by Fiscal Services

Index: _____ Program: _____