



APPLICATION TO ESTABLISH A NEW FAMIS ACCOUNT

Please answer all 10 questions.
Missing information will prevent the account from being created.

- 1 Proposed Account Title: (30 Character Max) _____
Account Title - Long Name: _____
- 2 Reason New Account is Needed: _____

- 3 Who will be Responsible for the Account / Approve expenditures? _____

Source of Funds:

- 4 Where do Funds Originate? _____
- 5 Type of Funds:
 - Federal Fed. Agency: _____ CFDA#: _____
 - State State Agency: _____
 - Private Gifts Donor Name: _____
 - Budgeted From Fund Group: _____
 - Other _____
- 6 Availability of Funds:
 - Program Beginning Other: _____
 - Program Termination

Use of Funds:

- 7 Account Expenditures for:

Instruction	Academic Support	Oper. & Maint. Of Plant
Research	Student Services	Scholarship & Fellowships
Public Service	Institutional Support	Auxiliary
- 8 Restrictions, in any: _____

Contingencies:

- 9 If actual expenditures exceed actual revenue, what account or department will be charged for the losses?
FAMIS acct# _____ Department: _____
- 10 Termination: How should any unused funds be handled once funding and expenditures cease?
Refunded to original provider of funds? Is yes, please provide an address.
Transferred to FAMIS Account #: _____ Transferred to TAMIU General Funds.

Please submit request with any supporting documentation to KL160 or KL162 for approval signatures below.

Comptroller's Approval: _____

Budget Director's Approval: _____

For Comptroller Office Use Only:

Account # _____ Department: _____ NACUBO Function: _____