

INSTRUCTIONS COST/FUNDS CENTER REQUEST FORM

- **Type of Transaction** - Indicate (by checking the box) the purpose of this form. Note: In the case of a master data element change, complete only the cost/funds center data that is changing, the cost/funds center number, date, and affix the proper signatures.

- **Source of funds** - Indicate with an "X" the source of the funds for the cost/funds center being created.

- **Name of Cost/Funds center** - Enter a 20 character short title for the cost/funds center.

Example: Hosp Accounting

- **Description** - Enter up to 40 characters for the description of the cost/funds center.

Example: Hospital General Accounting

- **Responsible Person SAP Login ID** - Enter the six-digit SAP Login ID of the Budget officer with responsibility for the cost/funds center. This should be the same person indicated on the next step.

Example: rcbeck

- **Responsible Person Name** - Enter up to 20 characters of the name of the Budget Officer with responsibility for the cost/funds center. This should be the same person listed as the user entered on the SAP Login ID. Enter the first name and last name separated by a space but with no punctuation.

Example: Ronda Beck

- **Department Number** - Enter the 5-digit department number designating the academic or support unit.

Example: 75210

- **Hierarchy area** - Enter the lowest level of the standard hierarchy cost center group node in which the cost center reports.

Example: H75210

- **Business Area** - An organizational unit that requires audited financial statements for external use. Often this corresponds to a separate operational or responsibility area in the organization. Enter the Business Area or select the appropriate one from the drop down menu.

Example: 0111

- **Contact Person** - Enter the first and last name separated by a space but with no punctuation.

Example: Ronda Beck

• **Campus Address** - Enter the UK mailing address for the person named above. For on-campus locations, enter the room number and building name. For off-campus locations, enter the street address and City name.

Example: 110 Funkhouser Bldg.

• **Speed sort** - For internal mail delivery enter the 4-digit code to be used within the University. For off-campus locations, enter the ZIP code.

• **Funding Category Code** - Enter the funding category code from the drop down menu or contact the area Budget Office for assistance.

• **Research Priority Area** - Enter a research priority area from the drop down menu. This field is only required if the cost/funds center meets the research categories as outlined in values on the field search menu.

• **Budget Family** - Enter a budget family from the drop down menu.

• **Functional Area** - Four digit code used in FI to define the academic or support programs represented by this cost/funds center. Enter the assigned functional area from the drop down menu.

• **Discipline (CIP code)** - Enter the CIP code or use the drop down menu to select the assigned code from the list.

• **Cancer Research Area** - Indicate whether this cost/funds center supports cancer research by selecting the appropriate category from the drop down menu.

• **Discretionary and Valid for Payroll flags** - Indicate (by checking the box) if a cost/funds center is discretionary within policy defined limits and/or valid for payroll. If not, leave the boxes blank.

• **List other Cost Centers** - Indicate if there are additional cost center groups included.

• **Required Explanation** - Descriptive information regarding the purpose of the cost/funds center requested.

• **Approval Signatures** - Obtain the necessary approval signatures as follows:

1. Signature of the person completing the form
2. Signature of College/Division Business Officer
3. Signature of Area Fiscal Officer