

Financial Services Use Only				
Request #				
Fund Code				
Org Code				
Romeo ID#				

NEW FUND/ORG REQUEST

	NEWFUN								
		sts will be delayed or returned.)							
This is not a request for a research fund. All research requests should be directed to Office of Research & Scholarship.									
Evidence risk assessmen	risk assessment has been approved for type of agreement attached.								
☐ Authorization of Divisio	f Division overseeing type of activity attached. All RG and CPS activity needs to be approved by the Executive								
Director, Continuing & Professional Studies. All fundraising activity needs to be approved by the Chief Advancement Officer.									
☐ If a course/training sessi	on is involved, course develop	oment form has been completed & subm	itted to Scheduling &						
Registration.	-	-	_						
Detailed budget attached	1 .								
Signed documentation for	or funding source and activity a	attached. (Section D)							
		agreement/contract, award letter, MOU	, donation letter, project letter,						
etc. Internal - budge	t memo, internal corresponden	nce, etc. Appropriate signing authority	must be on documentation.						
☐ Signed correspondence f	from external/internal authority	y indicating provision to cover deficit at	end of project attached. (Sec. E)						
Signed correspondence f	from external/internal authorit	y indicating distribution of surplus at en	ad of project attached. (Sec. E)						
	en completed and applicable ar		1 3						
	ted on each page of form and a	=							
	form to: email Fund.Accounti								
Flease leturii completed	Torii to. eman Fund.Account	тд шкри.са							
Section B: Fund/Org Name									
Section D. Tund/Org Name									
Suggested Name (30 charac	cters max)								
F = 1/O = C = = 1' = + + =		Dent/Heit Denne wille for Decise							
Fund/Org Co-ordinator		Dept/Unit Responsible for Projec	<u> </u>						
Section C: Fund/Org Detail	ils								
		Attach separate page if necessary.							
I I I		I G J							
Start Date	End Date	Date Required							
Start Date (yyyymmmdd)	End Date(yyyymmmdd)	Date Required(yyyymmmdd)							
(yyyymmmdd) Section D: Funding Inform	(yyyymmmdd)								
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Section D: Funding Inform Externally Funded Sale of goods and service Donation/Fundraising Contracts/Agreements	vices (no contract) Terms or purpose: Funding Agency s/Grants Name:	(yyyymmmdd)							
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Section D: Funding Inform Externally Funded Sale of goods and serve Donation/Fundraising Contracts/Agreements Provide details of how pa Cheque with grant	vices (no contract) Terms or purpose: Funding Agency s/Grants Name: Direct Deposit with grant	ning of payments:	page 2)						
Section D: Funding Inform Externally Funded Sale of goods and serve Donation/Fundraising Contracts/Agreements Provide details of how pa Cheque with grant Other	vices (no contract) Terms or purpose: Funding Agency s/Grants Name:	ning of payments:	page 2)						
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Project Name			Financial Services Use Only	Request #			
Section E: Financial Services	Requirements						
☐ External invoicing Agency Name:	ernal invoicing		External invoicing instructions (including amount) and frequency:				
Contact Name:		_					
Address							
External Financial Reports s Contact Name: Address:	sent to:		External reporting instructions	and frequency:			
Telephone:			E-mail				
Provision to cover deficit at the	end of the project.	_		te internal sourc	e.)		
Fund			Org				
Distribution of surplus at the end	of the project (% of	distribution must	t equal 100%)				
Internal Distribution	% Fund		Org				
☐ Internal Distribution	% Fund		Org				
Other (e.g. sharing agreement/return to funder)	% to Exte	ernal Authority N	Name				
Section F: Signing Authority a responsibility for activities within signing authorities will be able to	n this fund/org. <u>No</u>	<u>ote</u> : Authorized	request approver will also be de	signated as signi	ing authori	ity. All	
Name		Signa (only re	ture eq'd for signing authority)	signing authority	FAST Finance access	view salary info	
VP/AVP/Dean/ Director Delegate							
Fund/Org Co-ordinator							
Other (Indicate role)							
Other (Indicate role)							
If Finance does not have your http://www.kpu.ca/file/signing			nplete the Signing Authorization	on Form. Link:			
Section G: Requester Informa	tion and VP/AVP	/Dean/Director	Approval for Request				
Name of Requester (Print Name	e and Date)	Local	Signature				
VP/AVP/Dean/Director Approv	val (Print Name and	d Date)	Signature				

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