

Organization Description Change Form

Purpose: To update a existing Organization Description.

Contact Information:

Prepared By

Phone Number

Date

Chart of Accounts:

Organization:

Current Organization Title:

New Organization Title:

Reason for Change:

Effective Date:

Financial Manager:

Signatures Required:

Chair

Dean or Director

Vice President

ACCOUNTING USE ONLY

Default Fund:

Default Program:

Entered into Banner By (signature)

Date Entered