

BRIGHAM YOUNG UNIVERSITY
Endowment Operating Unit Set-up Request
Return to Kathleen Rugg C-233 ASB

Date: _____

Operating Unit _____
(Financial Services use only)

PLEASE PROVIDE THE FOLLOWING INFORMATION IN DETAIL.
**ATTACH DOCUMENTATION EXPLAINING THE PURPOSE OF THE OPERATING UNIT, INCLUDING
AGREEMENTS AND COMMUNICATIONS WITH DONORS**

Endowment Name

(Limited to 30 Characters)

1. Endowment Long Description: _____

2. Purpose of the Endowment (how it will be used): _____

3. Describe all sources of funds: _____

4. Types of expenditures: _____

5. Transfers needed to create the endowment (Operating Units and amounts): _____

6. Responsible Person:

Name _____
Address _____
Phone _____
Route Y ID _____

Contact Person:

Name _____
Address _____
Phone _____
Route Y ID _____

7. College/Division _____

Department _____

Department Operating Unit _____ (or Operating Unit range new Unit should be grouped with)

Requested by (Dept use only) _____
Signature e-mail address Date

Controller Approval (Required) _____
Signature e-mail address Date

If e-mail address is provided, notification will be sent when Operating Unit has been activated

Financial Services Use Only

UFS APPROVALS:

Received Date

Director/Supervisor Date

Setup by Date

Administration Vice President/CFO Date

Name Approved by President's Council Date