The University of Oklahoma
Health Sciences Center
Application to Establish a Chartfield Attribute Value

1) General Information

College/Admin Area: _____

Dept./Center Name: _____

OU Contact Name: _____ Phone: _____

OU Contact e-Mail Address: _____

Manager / Sponsor (Responsible Party): _____

2) New Org (Example AAA000): _____ Effective Date: _____

   1. Name/Description (30 Characters): _____

   2. Justification for New Org: _____

3) New Project

   a) Optional (Cannot begin with AX, EC, C#, SC or SU): _____ Effective Date: _____

      1. Name/Description (30 Characters): _____

      2. Justification for New Project: _____

   b) AX, EC, SC or SU (to be assigned by Financial Services): _____ Effective Date: _____

      1. Name/Description (30 Characters): _____

      2. Justification for New Project: _____

      3. Financial Org: _____

4) New Subclass

Subclass:	Description:	Effective Date:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5) Signatures:

   Departmental Approval: **Dean's Office Approval:**   **Financial Services Approval:**

_____ _____ _____