



Controller's Office • Long Jones Hall • Rm 263

# Agency Account Application - Student Orgs

**Read** each section. **Fill in** the requested information in order. **Return** to the Controller's Office after the Coordinator of Student Orgs has signed. Please type into this form.

1) Account Code: **700-** \_\_\_\_\_ (Controller's Office will assign upon completion)

2) Org/Account Name: \_\_\_\_\_

3) Purpose of Organization: \_\_\_\_\_

4) Source of funding: \_\_\_\_\_

5) Have any group members been associated with an agency account that has been closed within the last year?      YES      NO  
 If yes, give account info and details on why account was closed? \_\_\_\_\_

6) As officers of this organization we understand that we are responsible for any financial obligations incurred by this organization and for any overdraft in this agency account.

7) **The organization authorizes the university to forfeit any abandoned monies to the Student Organizations Council account. Monies will be deemed abandoned if for three fiscal years, there is no account activity (see Agency Account Policy) and there is no current Account Acknowledgement Form on file with the Controller's Office.**

**8) Officer Information: Provide contact info for Pres., Vice Pres., and Treasurer**

_____	_____	_____
Name	Title	Phone No.
_____	_____	_____
Email	Classification	<b>Signature</b> (must match signature form)

  

_____	_____	_____
Name	Title	Phone No.
_____	_____	_____
Email	Classification	<b>Signature</b> (must match signature form)

  

_____	_____	_____
Name	Title	Phone No.
_____	_____	_____
Email	Classification	<b>Signature</b> (must match signature form)

**9) Advisor Information**

_____	_____	_____
Name	Title	Department Name
_____	_____	_____
Email	Campus Box/Extension	Signature

10) We, the officers and advisor, have read and understand the Agency Account Policy.      YES      NO Initial Here \_\_\_\_\_

**11) Verification and Approval**

This organization is currently registered and functioning on the campus of Grambling State University.

\_\_\_\_\_  
Signature - Coordinator of Student Orgs.      \_\_\_\_\_  
Date

This organization has met/fulfilled all requirements and is clear to establish a new account.

\_\_\_\_\_  
Signature - Agency Account Custodian      \_\_\_\_\_  
Date