

Non-credit (Destiny)

Type of Request: New Modify (eff. date: _____) Deactivate Tied to a Course(Course #: _____)

Proposed Banner
Detail Code (opt.)
Description to Appear on A/R Billing (28 char. max.)

Description of Intended Use / Reason for Request: _____

Accounting Information:	Index	Fund	Account	Activity (Opt)
Index 1	_____	_____	_____	_____
Index 2	_____	_____	_____	_____
Index 3	_____	_____	_____	_____

Printed Name of Requestor _____ Signature _____ Date _____ Unit _____

Printed Name of Administrator _____ Signature _____ Date _____ College or Executive Unit _____

(Authorized Use Only)

Transaction Type
 Charge Payment _____ Receipt _____ Refund Code Refundable

General Ledger Information			Category	Priority				
Percent	Accounting	Index	Fund	Account	Activity (opt)	Rule Class 1	Rule Class 2	Rule Class 3
%	A (Dr)	_____	_____	_____	_____	_____	_____	_____
%	B (Cr)	_____	_____	_____	_____	_____	_____	_____
%	A (Dr)	_____	_____	_____	_____	_____	_____	_____
%	B (Cr)	_____	_____	_____	_____	_____	_____	_____
%	A (Dr)	_____	_____	_____	_____	_____	_____	_____
%	B (Cr)	_____	_____	_____	_____	_____	_____	_____
%	A (Dr)	_____	_____	_____	_____	_____	_____	_____
%	B (Cr)	_____	_____	_____	_____	_____	_____	_____

>>>> Send Completed Forms to: Student Financial Services, NH167 <<<<<

FOAPA Approval:

Approved Signature Title Date

Comments: _____
Notified: (As Needed) Department _____ ARR _____ Updated
Initial /Date Initial /Date Initial /Date
Initial /Date