**Chart of Accounts (COA) Maintenance**

**DeptID Request- CHANGE**

Use this form to request a change to an existing deptID or to reactivate an inactive deptID.

Refer to Guide: Chart of Accounts (COA)\Chartfields for further information on deptID.

Refer to the COA Department ID Management Document located in the Forms Cabinet for further details pertaining to this form.

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| **CHANGE OR REACTIVATE DEPTID** | | |
| **DeptID Number**   **Change**   **Reactivate** | |  |
| **Effective Date** (mm/dd/yyyy) | |  |
| Change deptID name  (max. 30 characters. Refer to the Naming Conventions section in the ‘DeptID Management’ document) | New name | Click to enter deptID name |
| Change Long Description  (max. 100 characters) | New name | Click to enter long description |
| Change budget owner | Employee ID (for PS setup) | Click to enter employee ID |
| Employee name | Click to enter employee name |
| Position name | Click to enter position name |
| Change One-over-One deptID approver (“one over”) | New one over DeptID number | Click to enter one over deptID number |
| New one over name and position | Click to enter one over name and position |
| Confirmation of one over routing | **REQUIRED:** SFO has reviewedDEPTID\_BUD\_OWNER tree to ensure one over approval routing is appropriate (i.e. the budget owner for the one over is not the same as the budget owner for the deptID being changed, and the budget owner for the deptID being changed reports organizationally to the one over) |
| Department Level Security | New Parent DeptID | Click to enter new parent deptID |

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| **INACTIVATE DEPTID** (note: inactivating a deptID will also inactivate speedcodes associated with the deptID) | | |
| **DeptID Number** |  | **REQUIRED:** SFOhas confirmed that there is no outstanding activity related to the deptID being inactivated. |
| **Effective Date** (mm/dd/yyyy) |  |

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| **CHANGE BUDGET VARIANCE CARRY FORWARD** | | |
| **DeptID Number** |  | DeptID budget variance carries forward to itself  OR  DeptID budget variance carries forward to the dean |

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| **SFO Approval**  Note: SFO Name and Phone Number is required. SFO signature is only required if an individual other than the SFO is submitting the form on their behalf. If SFO is emailing the form, signature is not required. | | | | | | |
| Click to enter SFO Name |  |  |  |  |  |  |
| SFO Name |  | SFO Signature |  | Date  (mm/dd/yyyy) |  | Phone Number  (###-###-####) |
| **Dean’s Approval**  Note: Dean’s signature is **only** required if the SFO is the budget owner. | | | | |  |  |
| Click to enter Dean Name |  |  |  |  |  |  |
| Dean Name |  | Dean Signature |  | Date  (mm/dd/yyyy) |  | Phone Number  (###-###-####) |
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| **ROUTING INSTRUCTIONS**  Senior Financial Officer (SFO) emails completed form to fscoarpt@ualberta.ca  The request will be assessed and set up within 10 business days; SFO will be notified if this timing cannot be met. |