

Winthrop University Foundation

WUF-A Fund Information Form

Return to: WUF Finance Office, 302 Tillman Hall



Foundation

New Fund Request
Fund Change Request (highlight changed items)
Close Fund Request

Date: _____

Fund Name: _____

Fund #: _____

Administrator Name: _____

Title: _____

Campus Phone/Ext.: _____

Campus Address: _____

College/Dept. Name: _____

E-Mail Address: _____

Please indicate type of fund: Annual Restricted Fund Discretionary
 Endowed Fund
 Other

Source of funding: _____

Amount to be deposited: _____

Identify the type of activity this fund is intended to support:

- Unrestricted to College
- Restricted to Department
- Student Scholarship
- Faculty/Staff Support
- Other _____

Attach copies of all relevant donor correspondence. Please be specific with any donor-imposed restrictions

Donor Restrictions:

Additional Information/Comments:

*New Fund Administrators or replacements for current Fund Administrators are appointed by the Dean, Director or Vice President. This form must have the signature of the Dean, Director or Vice President before it is submitted to the Foundation for processing. If the Fund administrator will be the Dean or Director, the appropriate Vice President must authorize. If the Vice President is to be the Fund Administrator, the President's approval is required.

Note: Incomplete forms or those without proper approval signatures will be returned to the Fund Administrator

Department Approval Name: _____ Signature: _____

*Dean/Director or VP Approval Name: _____ Signature: _____

WUF Executive Director Approval Name: _____ Signature: _____

Foundation Office Use Only

Date Entered: _____

By: _____

Effective: _____