

# New Accounting Unit Request Form

## Sponsored Program Accounting

Use this form to request a new 6 digit Sponsored Program Accounting (SPA) managed accounting unit.  
If a different AU type is needed use this [form](#).

Accounting Unit Type:

LU/PTAP: (Where applicable)

Person Responsible (PI):

Person Responsible (PI) email:

Department Name and #:

(this is the department to which the AU will be assigned)

Departmental administrative support contact for SPA AU email(s):

**General notes and comments, if any:**

### Minimum Required Documents for AU Set Up:

#### Lakeside Campus

PTAP Form - AU set up for SPA  
Grant Agreement  
Budget - account code breakdown  
Budget - from proposal with itemized justification  
Physical check, if rec'd, sent to SPA via interoffice mail  
Federal Award Number & CFDA Number \*  
(In writing from Sponsor)  
Grants from Non-Gov't Sponsors Form\*  
Cost-Share Request Form\*  
Cost-Share Budget - with account code breakdown\*

#### **University Funded (1045xx) (1047xx) (1048xx)**

Signed letter or contract  
Budget  
Net assets transfer JE request  
**OR**  
Support showing JE already processed

#### Health Sciences Campus

##### **Federal & Non-Fed Grant; Federal Clinical Trial & Contracts:**

Portal Documents (including):  
Routing forms  
Budget  
Cost-Share approval \*  
Indirect cost waiver\*  
Grant agreement OR  
Clinical trial agreement & IRB approval letter  
Physical check;  
if rec'd, sent to SPA via interoffice mail

##### **Industry Clinical Trial**

Contract (with study budget)  
IRB approval letter  
Budget & copy of start-up check, with physical check sent to SPA via interoffice mail

#### **University Funded (103xxx) (1034xx) (1036xx - 1039xx) (1046xx)**

AU set-up & upload spreadsheet  
Completed budget transfer  
For RFCs, portal set-up package required

#### University-wide

##### **Advance AU**

Advance Account Authorization Form  
Documentation showing Awardee's intent to fund. e.g. letters of intent, emails, budget requests, etc.

##### **Gift (2xxxxx)**

Donor award letter  
Allocation request form  
Physical check, if rec'd, sent to SPA via interoffice mail  
**OR**  
documentation confirming University deposit check or eft

#### **University Funded (1041xx) (107xxx) (1071xx)**

Signed letter or contract  
Budget  
Net assets transfer JE request  
**OR**  
Support showing JE already processed

\*if applicable

Revised 6/10/2022