


Directions for Completing the Funding Segment Value Request Form

When a new Funding value is required, the Requestor must:

- Fill out the Funding Segment Value Request Form (below) with all of the information needed by the Controller's Office.
- Have the request and form approved by your Division or School Fiscal Officer.
- Forward the form and any accompanying information to the Controller's Office.

 Dartmouth College Funding Segment Request Form *** All Fields Are Required ***		
ALL NEW ENDOWMENT DISTRIBUTION FUNDING REQUESTS MUST COME FROM THE OFFICE OF ENDOWMENT ADMINISTRATION		
Requestor Name: 1	Position Title: 2	Request Date: 3 MMDDYY
Division/Department: 4	Phone: 5	E-Mail: 6
Check The Appropriate Action and Indicate the Desired Effective Date:		
<input type="checkbox"/> Create New 7	<input type="checkbox"/> Disable Existing 9	<input type="checkbox"/> Change Responsible Person 11
<input type="checkbox"/> Modify Existing 8 MM MMDDYY	<input type="checkbox"/> Re-Enable Existing 10 MM MMDDYY	<input type="checkbox"/> Change Faculty Member 12 Y MMDDYY
13 indicate which level you are requesting to create, modify, disable, or re-enable: <input type="checkbox"/> Level 1 Parent <input type="checkbox"/> Level 2 Parent <input type="checkbox"/> Level 3 Parent <input type="checkbox"/> Level 4 Parent <input type="checkbox"/> Level 5 Child		
Provide the description and the value, if known, for each parent in the hierarchy that relates to the value you are requesting:		
	Description (not to exceed 35 characters)	Value (if known)
Level 1 PARENT	14	15
Level 2 PARENT		16
Level 3 PARENT		
Level 4 PARENT		
Level 5 Child	17	
The Level 5 Child Value should only be filled-in if you are requesting to Modify, Disable, or Re-enable that value. When requesting that a new value be created, the Controller's Office will assign a value based on availability.		
Describe The Specific Business Purpose For This New Segment Value Or The Reason For Requesting The Change including the estimated dollars that will be captured using this value. 18		
19 Is an NCAA Endowed Funding Value? 19 Yes <input type="checkbox"/> No <input type="checkbox"/>	20 Funding Value used by a specific Faculty Member? 20 Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, who is the Responsible Faculty Member? 21
		If changing the Faculty Member responsible, who was the former Responsible Faculty Member associated with this Funding Value? 22
Who is responsible for the monitoring and spending on this Funding Value? 23	If changing the responsible person for monitoring and spending, who was the former responsible person for this Funding Value? 24	Is this a Mass Change? 25 <input type="checkbox"/> Yes <input type="checkbox"/> No
Division/School Fiscal Officer Approval:		Date:
Controller's Office Approval:		Date:
BOARD_RESERVE_ANALYSIS: _____ For EVP Office Use Only		

Please refer to the following table for definitions of items on the Request Form.

Form #	Field	Description
1	Requestor Name	Name of the individual who is requesting the new value
2	Position Title	Position Title of the Requestor
3	Request Date	Date of the request for the new Funding value (MMDDYY). Please allow 5 business days for processing and set up in the Oracle GL.
4	Division/Department	Division or department in which the Requestor works
5	Phone	Phone number of the Requestor
6	E-Mail	E-Mail address of the Requestor
7	Create New	Check if you would like a new Funding value created. Indicate the desired date (MMDDYY) for this value to be effective.
8	Modify Existing	Check if you would like an existing Funding modified (e.g. move child values to a different parent or modifying Org descriptions). Indicate the desired effective date (MMDDYY) for this value to be modified.
9	Disable Existing	Check if you would like an existing Funding value to be disabled (frozen). Indicate the desired effective date (MMDDYY) for this value to be disabled.
10	Re-Enable Existing	Check if you would like an existing Funding that had been previously disabled, to be Re-Enabled. Indicate the desired effective date (MMDDYY) for this value to be re-enabled.
11	Change Responsible Person	Check if you would like to change the existing responsible person on the Funding to another individual. Indicate the desired effective date (MMDDYY) for this change to take place.
12	Change Faculty Member	Check if you would like to change the Faculty Member associated with this Funding value. Indicate the desired effective date (MMDDYY) for this change to take place.
13	Hierarchy Level Requested	Check which Level is to be created, modified, disabled, or re-enabled.
14	Parent Description	For each level being requested, the Parent description in the hierarchy MUST be provided.
15	Parent Value	For each level being requested, provide the Parent values (if known) in the hierarchy.
16	Assigned Value	For Controller's Office Use only. Here is where you will see the new Funding Value assigned.
17	Child Requested Description	Description that the end-user will see in reports. Provide the description you would like the value to have. Funding value descriptions must not exceed 35 characters.
18	Business Purpose	The specific business purpose for the new segment value, or the reason for the change request.
19	NCAA	Check Yes if this Value is associated with NCAA Reporting.
20	Faculty Member Use	Check Yes if this Funding value is used by a specific faculty member.
21	Responsible Faculty Member	Name of the faculty member who is associated with this value.
22	Changing Faculty Member	If changing the faculty member, name of the former faculty member here.
23	Responsible Person	Name of the person responsible for monitoring and spending on this value.
24	Former Responsible Person	Name of the person formerly responsible for monitoring and spending on this value.
25	Mass Change	If the former responsible person was associated with more than one Funding value and you are requesting that the responsible person be changed on all of those values, please indicate whether this is a Mass Change or not.

Key Items to Keep in Mind:

- All fields are required. Requests will be sent back if all fields are not filled in properly.
- New Funding value requests must be approved by your Division or School Fiscal Office and the Controller's Office.
- The Request Form must come in e-mail format to the Controller's Office at GL_Chart@dartmouth.edu.
- Parent and Child Descriptions and Values MUST be provided for each level that is being requested.
- If you are creating a new child Funding value, please be sure to coordinate that Funding with the Funding in HRMS.

Next Steps

Send the Request Form via E-mail to your Fiscal Officer. The Fiscal Officer will approve or deny the Request.

If . . .	Then . . .
The request is approved	The Fiscal Officer will send the approved request form via e-mail to the EVP Office.
The request is denied	The Fiscal Officer will send the denied request form via e-mail back to the Requestor with the reasons why it was not approved.

- The Controller's Office will approve or deny the request from the Fiscal Officer.

If . . .	Then . . .
The request is approved	The Controller's Office will make the changes in the GL and send an e-mail with the new assigned value to the Fiscal Officer and the Requestor.
The request is denied	The Controller's Office will send the denied request form via e-mail back to the Fiscal Officer and the Requestor with the reasons why it was not approved.