

**REQUEST FOR NEW/**CHANGE TO** DEPARTMENT**

**Date:** \_\_\_\_\_  
**Requester:** \_\_\_\_\_  
**School:** \_\_\_\_\_  
**Box:** \_\_\_\_\_  
**Ext:** \_\_\_\_\_

**Add:** \_\_\_      **Change:** \_\_\_

**Department Number:** \_\_\_\_\_  
**Department Title:** \_\_\_\_\_  
**School Code:** \_\_\_\_\_  
**Campus Box Number:** \_\_\_\_\_

Tree Code: \_\_\_\_\_  
Tree Title: \_\_\_\_\_  
Department Type: \_\_\_\_\_  
Dept 2 Character Abbreviation: \_\_\_\_\_  
Budget Responsibility Dept No.: \_\_\_\_\_  
BA Routing Number: \_\_\_\_\_  
Medical School Organizational Group: \_\_\_\_\_  
Other Funds Schedule Type: \_\_\_\_\_

**Parent Dept:** \_\_\_\_\_  
**Do you want to link this department to the parent department?** \_\_\_\_\_

**Approval Requirements for Social Expenses:**

**Will this Department use HRMS? If so, additional form to be completed:** \_\_\_\_\_

**\*\*Add to RMS (formerly PDS)**\_\_\_

**\*\*Add to Space and Assets** \_\_\_

**Special Instructions:**