



NEW ACCOUNT REQUEST FORM

This form should be used to establish a new account (project) within University Foundations

Please complete and remit this form to Lindsey Fisher (777-1826) at LFisher@mailbox.sc.edu.

PREPARER INFORMATION:

Date: _____

Name: _____

Phone: _____

***Please Note:** An *approved Draft Gift Agreement* or an **Unendowed Project Agreement** must accompany this form.

ACCOUNT INFORMATION:

Account Name: _____

Account Type: _____
(ie: Scholarship, General, Fellowship, Research, Chair/Professorship, etc)

VSE Category: _____

College/Unit: _____

Account Departmental Contact Name: _____

Account Department Lookup ID: _____

Endowment Classification:	Unendowed	There are no intentions of ever endowing this project
	Endowed	The project will be endowed when the fully executed gift agreement has been received and the funds have reached the required endowment level

Amount Ready to Deposit into Account: _____

If no money has been received, when do you anticipate the first deposit? _____

Will funding for this project be *predominantly* generated by fundraising events? YES NO

Donor Name: _____

Donor Lookup ID: _____
(If the Donor is deceased, please specify who should receive donor letters.)

FOR FOUNDATION USE ONLY

Project ID Assigned: _____

Date: _____