

REQUEST FOR CHANGES IN SYSTEM TABLE

Date: _____

Requestor: _____ Dept: _____ Ext. No.: _____

System Table Element to be Changed:

Organization _____ Calendar _____

Account _____ Vendor _____

Fund _____ Bank _____

Program _____ Fin. Mgr _____

Title of Data Element to be Changed: _____

Banner Form(s) to be Changed: _____

Purpose for this change:

System Table Before Change:

After Proposed System Table Change:

APPROVAL/DISAPPROVAL:

	Action	Signature	Date
Budget Officer	_____	_____	_____
Controller	_____	_____	_____
Data Control Manager	_____	_____	_____

Date Entered: _____

Initials: _____