



# CALIFORNIA STATE UNIVERSITY BAKERSFIELD

## Delegation of Authority & Chartfield Request Form

### Instructions

#### SELECTIONS:

##### **Request New Chartfields**

Select this option when requesting new chartfields; use the explanation line to indicate the type of chartfield requested. Complete sections 1 through 3 when requesting new fund or department chartfield. If you are requesting a new account, program, project, or class chartfield, please complete sections 1 and 3 only.

##### **Modify/Inactivate Existing Chartfields**

Select this option if you wish to update title on an existing chartfield or if a chartfield needs to be inactivated; use the explanation line to indicate if you are modifying or inactivating a chartfield. Please complete sections 1 and 3 only. If inactivating a fund or department, please check box "Select box to delete all existing authorized signers" in section 2 to remove signing authority.

##### **Add/Remove Delegation of Fiscal Authority**

Select this option if you wish to update any signers for specific chartfields; use explanation box to indicate reason for adding or removing signers. Please complete sections 2 and 3 only.

#### SECTION 1 CHARTFIELD MAINTENANCE

**Business Unit:** For all chartfield requests, a business unit must always be filled in.

**Fund:** For all new fund requests, a completed trust agreement must be completed. Use the explanation line to indicate type of fund (i.e. new miscellaneous trust, new course fee, etc.).

**Department:** For all new department requests, please obtain prior approval from Budget Officer and attach an organization chart. We will contact requestor to determine NACUBO program mapping for new departments.

**Account:** Use the explanation line in the section above to further explain the type of account requested (i.e. new revenue or expense account).

**Program:** For all new program requests, please ensure the activity will be tracked campuswide and is not specific to any department or school.

**Project:** This chartfield is used to track an activity that will have a beginning and end date.

**Class:** This chartfield is used to track any activity that does not fall under other chartfields. It is recommended for users to use class codes C0001-C0100 as these are user defined.

**Effective Date:** Use the first day of the current fiscal year for the following chartfields: Fund, Department, and Account. For all other chartfields, use the first day of the current month.

**Title:** Indicate title of new chartfield requested, limitation is 30 characters. Please abbreviate title in order to meet the 30 character limit.

**Payroll Cost:** Check this box if payroll expenses will apply.

**Project Start & End Dates:** Must indicate start and end dates for all project requests.

**Grant Contract:** All grant requests must be reviewed and approved by Sponsored Programs Post Awards office.

#### SECTION 2 DELEGATION OF FISCAL AUTHORITY & RESPONSIBILITY

**Note:** Delegation of Authority is only granted for fund and department levels. It cannot be granted for project, program and class chartfields. It is recommended that departments review the delegation of fiscal authority for their respective areas on an annual basis for changes and updates. **All four levels of authorized signers must be assigned for each fund/department combination.**

**Business Unit:** Select the appropriate business unit from the drop-down list.

**Division:** Select the appropriate division from the drop-down list.

**Fund:** For all funds requested, a completed trust agreement must accompany this request.

**Department:** For all new departments requested, an organization chart is recommended to be attached.

**Authorized signers:** Delegation of Authority must be assigned for each of the following levels: Level 1 (President/CFO); Level 2 (Provost, Vice-Presidents); Level 3 (Deans, AVP, Controller, Athletic Director) and Level 4 (MPP/Administrators, Associate Deans; Department Chairs, AVP; Grant Primary Investigators).

**Travel Costs:** Check this box if the fund or department chartfields will have travel costs.

**Concur Reviewer:** If travel box is checked, please provide the name of your department's travel reviewer.

#### SECTION 3 APPROVING AUTHORITY

This section must always be completed for all sections of this form. The following are acceptable approving authority: Campus President, Vice Presidents, Deans, Associate Vice Presidents and other MPP/Administrators. The Approving Authority must have hierarchical approval for all signers (i.e. Levels 3 and 4 signers must be approved by Level 2).