

Southeastern Louisiana University

Agency Fund Questionnaire

Please send form to the Controller's Office, SLU 10720, Hammond, LA 70403. Should you have any questions, please call Lori Gray at (985) 549-3754.

Name of Organization:

Organization's Federal ID Number: Is this a 501(c)(3) organization?

If you selected no, please indicate your legal/corporate status:

Is this organization a recognized "associated organization" under University policies or in any way affiliated or associated with Southeastern Louisiana University?

If you selected yes, please indicate the nature of the affiliation or association with Southeastern:

Indicate the reason(s) an agency account is being requested:

Describe the nature of the activity that will be processed through this account: (Source of funding and type of expenditures)

Are you acting primarily as a conduit through which funds are transferred to another organization with little/no University involvement?

If you selected yes, please indicate the name of the organization:

Are you functioning as an agent, trustee, or intermediary on behalf of another organization?

If you selected yes, please indicate the name of the organization:

Does this activity involve grants awarded to Southeastern, which the University, in turn, allocates to third parties that it selects and/or monitors for compliance with the terms of the grant?

Do you receive cash that you must disburse to specific third parties that the organization specifies?

What happens to any funds remaining at the end of the agency fund?

Who is obligated to pay expenses incurred when the agency fund does not have the available funds to pay?

Are there other funds available that support this organization?

Signature:
Requestor of Agency Fund

Date:

Phone Number:

Signature:
Controller's Office

Date: