1. Suggested title: __________________________________________________________

2. Describe the event that requires a new FOAPAL element (if restricted grant or contract, attach copy of award document and proposal or signed contract); for Federal Grants indicate (CFDA) Catalog of Federal Domestic Assistance Number.

3. Estimated total project dollar volume of activity/organization $ __________________

4. Attach budget.

5. Budget Office Approval: ______________________________________________________
   (Required if Revenue Source is General Fund, Tuft/Fees, Sales/Serv, Aux Fund, or Gift)

6. List Fund/Org from which any deficit will be funded: __________________________

7. Identify the FOAPAL element being requested:
   Fund
   Organization
   Account (Object Code)
   Program
   Activity
   Location

8. Identify duration:
   Project Start Date __________________
   Project End Date __________________
   If not ongoing: ____________________

9. Identify the source of revenue: __________________________

10. Identify the expenditure purpose:
    __ Fund
        GF Operating Funds
        Tuition/Fees
        Research
    __ Organization
        Federal Appropriation
        Public Service
        Academic Support
    __ Account (Object Code)
        State Appropriation
        Student Services
        Institutional Support
    __ Program
        Federal Grant
        Scholarships/Fellowships
        Auxiliary Enterprises
    __ Activity
        State Grant
        __ Purpose:
        __ Instruction
        __ Public Service
        __ Student Services
    __ Location
        Other Grant
        __ Instruction
        __ Public Service
        __ Student Services
    __ Other

11. Name of responsible person/authorized signer:
    ____________________________

12. Additional authorized signers:
    ____________________________

13. Approved by ____________________________
    ____________________________

Title (35 max): ____________________________
Number (6 max): 0

Lake Superior State University
REQUEST TO ADD NEW FOAPAL
Fill in all information above dashed line except signatures. Print form and sign as appropriate. Attach any additional documentation that may be applicable and then return to Business Office.