

TRUST PROJECT REQUEST FORM

CSU Channel Islands

A. TYPE OF REQUEST: Check one (provide number of existing chartfield if there is a modification)				
<input type="checkbox"/> ESTABLISH NEW PROJECT <p style="text-align: center;">Axxxx</p>	<input type="checkbox"/> MODIFY EXISTING PROJECT Indicate Number of Project			
B. PROJECT NAME: (Max 30 Char)			C. EFFECTIVE DATE:	
D. PLEASE LIST EXPECTED SOURCES OF TRUST INCOME HERE:				
E. PLEASE INDICATE THE PURPOSE OF THE TRUST AND THE TYPE OF EXPENDITURES:				
<i>Twice a year interest will be distributed to each trust project based upon an average cash balance</i>				
F. THIS PROJECT WILL REMAIN ACTIVE UNTIL**:			G. OR INDEFINITELY**:	
H. **Please indicate how any balances should be distributed if the fund becomes inactive. This information is required even if the fund is to remain active indefinitely. Balances may not be transferred to non-state accounts, such as Foundation or ASI.				
I. ANNUAL BUDGETS ARE REQUIRED FOR ALL TRUST FUNDS WITH BALANCES OF \$25,000 OR MORE (Please attach 1st fiscal year budget)				
EXPENDITURE APPROVAL				
J. Expenditure approval will be by the Project administrator or an individual at an equal or higher level in the organization unless otherwise indicated. All expenditures are subject to final review by Accounting/Budget.				
K. SIGNATURES REQUIRED TO ESTABLISH TRUST FUND PROJECT				
	Department	Printed Name	Signature	Date
Preparer				
Project Administrator				
Director/VP of Division				
Accounting Manager				
Budget Manager				
FOR BUDGET DEPARTMENT USE ONLY:				
Payroll Account Code established _____		CI_Legal_Edit_Rev updated _____		
Enterprise updated _____		Update Chartfield List _____		
PS Finance Create/Update _____		Notification _____		

TRUST PROJECT REQUEST

SUPPLEMENTAL INSTRUCTIONS

Please type or print neatly, except where signatures are requested.

A. TYPE OF REQUEST

- If this is a request for a new trust project check the “Establish New Project” box, once approved a new project number will be emailed to the requestor
- If this is to modify a current trust project check the “Modify Existing Project” box and indicate the project number.

B. PROJECT NAME

- Enter the project name you would like to be associated with this project. There is a 30 character limit to this field

C. EFFECTIVE DATE

- Enter effective date of project

D. EXPECTED SOURCES OF TRUST INCOME

- Please indicate sources of income (e.g. contributions, charges for services, etc.).
- Trust income is limited by Education Code Section 89721 to the following:
 - (a) gifts, bequests, donations, etc.
 - (b) scholarship and loan programs
 - (c) advance payments under federal contracts or grants
 - (d) room and board for students enrolled in the international program of the CSU
 - (e) cafeteria replacement funds
 - (f) deposits
 - (g) fees and charges for optional use of services, materials or facilities *
 - (h) fees and other revenues from instructionally related activities
- Such fees and charges must be authorized by the trustees or by the chancellor or the campus president if authority has been delegated by the trustees.
- Trust funds must maintain a positive cash balance. It is the responsibility of the project administrator to monitor the cash balances and to identify an alternative source of departmental funds to cover cash deficits.

E. PURPOSE OF TRUST AND TYPE OF EXPENDITURES

- Please indicate why a trust fund is needed (e.g. to accumulate funds for expenditure in a future year, support of a specific campus program and explanation of the program).
- Also indicate the type of expenditures that will be made from the trust (e.g. equipment, field trips, student assistants, support of specific program , etc.)

F./G. FUND ACTIVE UNTIL

- Please indicate the approximate date the fund will close or check INDEFINITELY if the fund is expected to be permanent.
- Also, please indicate where remaining balances should be transferred if the account ever becomes inactive. This must be a State account. Normally it will be a General Fund account (e.g. the History Department Supplies and Services account).

H. DISTRIBUTION OF FUNDS AFTER INACTIVATION

- Include in this section the fund you would any excess funds to be distributed to after the project becomes inactivated. This is required even if the project is set up indefinitely. Balances CANNOT be transferred to Auxiliary units.

I. BUDGET

- An Annual Fiscal Year Budget will be required for any trust that has a balance of \$25,000 or more. Please be sure to attach a budget to the setup request form.

J. EXPENDITURE APPROVAL

- This block does not need to be completed unless someone other than the project administrator will be approving expenses (e.g. two signatures required, etc.). Expenditure approval will normally be by the trust administrator or other authorized person.
- All expenditures are subject to final review by the Accounting/Budget Department.
- In some cases, due to technical/security limitations of certain systems, staff or administrators who are not authorized to do so may be able to initiate or approve expenditures. If this is done without the authorization of the trust administrator, these expenditures may, upon request by the trust administrator, be retroactively transferred to another account for which the initiator has expenditure authority.

SIGNATURES REQUIRED TO ESTABLISH TRUST FUND

These signatures indicate that the signer has reviewed the request to establish or modify a trust fund and is in agreement with the need for the fund and/or the change requested.

- Project Administrator – The individual with primary responsibility for the trust project.
- Director/VP of Division – The Director/VP of Division must approve establishment of each trust project. This will normally be a department head, dean, or other senior administrator in the line organization of the trust project administrator.
- Accounting Manager & Budget Manager– Reviews trust requests for conformance with campus and CSU policy