KENNESAW STATE UNIVERSITY

Bursar's Office

Request for New Detail Code Form

Date _____

Department _____

Mail Drop # _____

Requested by (print) _____

Extension _____

Description Name

Fund (5 digits)	
Program (5 digits)	
Class (5 digits)	
Department (7 digits)	
Project / Grant (3 - 15 digits)	
Account (6 digits)	

Purpose
_____ _____

Frequency of deposits to this account (check one)					
One Time		**Often**		**Other**	

Bursar's Office Use		
Date Assigned	*Detail Code*	*Description Name*

Feb-19