FHS027: Additional information for opening a new Health Science fund

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| Instructions: |
| This form should be completed and submitted to FHS Finance together with [FM003 Application to open or change a fund](https://forms.uct.ac.za/fm003.doc), when opening a new Health Science fund. |

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| Fund Details: | | | | | | | | | | |
| Fund Name |  | | | | | | | | | |
| Department / Unit / Div. |  | | | | | | | | | |
| Fund Purpose |  | | | | | | | | | |
| Fund Type | GOB |  | Non-GOB | |  | Research | |  | Investments |  |
| **Please note:** Attach supporting documents for Non-GOB, Research and Investment funds. (Example: Grant Letter, Contract) | | | | | | | | | | |
| Activity Description (Provide a brief description regarding the activities that will be handled by this fund) |  | | | | | | | | | |
| Spending Rule(s): (Mandatory for all  Investment Funds) |  | | | | | | | | | |
| Income Source  and Process | Donation via donation bank account | | | |  | Invoices to be raised | | | |  |
| Internal journal transfer | | | |  | Budget transfers | | | |  |
| Type of Expenditure | Staff salaries | | | |  | Office and other operating cost | | | |  |
| Equipment /Capital expenditure | | | |  | Other specific to the fund activities | | | |  |
| Fund Authorities: | | | | | | | | | | |
|  | **Name** | | | **Signature** | | | **Date** | | | |
| Authorised Fund Holder Person authorised to use this fund (income and expenditure) |  | | |  | | |  | | | |
| Delegated Authority Authority given to other staff when fund holder is unavailable |  | | |  | | |  | | | |

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| **For Portfolio 2 and 3 Investment funds only:** | | | | | |
| **Do you consent for 10% contribution of investment income (interest only) towards Faculty of Health Sciences Academic Activities?** | | **Yes** |  | **No** |  |
| **Fund Holder Name** |  | | | | |
| **Signature** |  | **Date** |  | | |