

# NORFOLK STATE UNIVERSITY

## Request for

## Budget Line Adjustment

*(This form is used for budget category transfers within one account - ONLY)*

### Section I:

Submitted by:	
Date:	
Department Name/ Budget No:	

### Section II:

Summarize reason for both increases and decreases in each line item.


### Section III:

Indicate the amount to be transferred between the line items using whole dollars.

Budget Pool	Object	Budget Balance Available	Add to (+)	Subtract From (-)	Adjusted Balance
Non-personnel services	62000				\$0
Other Wages	61320				\$0
Grad Asst. Wages	61302				\$0
Student Wages	61304				\$0
Overtime	61108				\$0
Part-time Teaching Faculty (Adjunct)	61307				\$0
Classified	61104				\$0
Facutly Admin.	61101				\$0
Teaching Faculty	61109				\$0
Other:					\$0
<b>TOTAL</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

### Section IV:

Approvals must be made at the appropriate level.

Dept. Chair/Dean/Director	
Vice President/Provost	
President*	
GCFMU**	
Budget Director	

**\*If required**

**\*\*Grants only does not require Budget Director Signature**

### BUDGET OFFICE USE

BATCH #		ACTION	
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