New Banner Detail Code Request Form

Name:			e of Student Accounts.	
Department:				
Office Requesting D	etail Code:			
∟ist the Names or Em	nail Addresses of all en	nployees who	need notified of the ne	w code:
Name		Email Address		
Use:				
Departmental De	posit (Z)			
Non-Student Invo				
Financial Aid (A)				
Student Fee (O)				
- ∩thar∙				
o Other:				
		accounting str	ng. If your accounting	string does
n the box below, plea	ase enter the full SAP a	_	ng. If your accounting s u are unsure of your ac	_
n the box below, plea	ase enter the full SAP a	type 'N/A.' If yo	u are unsure of your ac	_
n the box below, plea	ase enter the full SAP a ese elements, please t	type 'N/A.' If yo	u are unsure of your ac	_

Send completed form to osa@millersville.edu for processing.