



**Application for Request for Change of Signator(s)  
on Fundraising HSCB Foundation Account**

(Submit Completed Application to Office of Development & Philanthropy, Heidi Christensen, MSC 93,  
Or Hand Deliver to Room BSB-M128-A) Please do not abbreviate on this application.

As stated in the Policies and Procedures for Fundraising Foundation Accounts: "Whenever signatory changes become necessary, new signators must certify they understand and accept the guidelines for responsibility and liability of the HSCB Foundation by signing a *Change of Signator(s) Application*. Primary signators shall sign off of the account using the same form."

Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Account Name: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

Type of Account (Check one):                      Endowment (    )                      Operating (    )

**Former Signator(s) To Be Deleted:**

(Primary\*)

Print Name: \_\_\_\_\_ Sign Name: \_\_\_\_\_

Print Name: \_\_\_\_\_ Sign Name: \_\_\_\_\_

AGREEMENT: The new signator(s) requests and authorizes the HSCB Foundation to receive, accept custody for, and disburse funds. Assets of restricted funds in accounts of the HSCB Foundation are the property of the HSCB Foundation. The HSCB Foundation reserves the right to refuse to pay out any funds that, in its own recognizance, it determines may be unauthorized or improper. However, the HSCB Foundation will not be liable for any funds used by signator(s) which may be unauthorized or improper, provided the appropriate signator(s) have executed the withdrawal order. The HSCB Foundation assumes no liability for actions of signator(s). Signator(s) agrees to hold harmless the HSCB Foundation from any and all actions against it resulting from actions of signator(s).

**New Signator(s) To Be Added:**

(Primary\*)

Print Name: \_\_\_\_\_ MSC #/Phone #: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ MSC #/Phone #: \_\_\_\_\_ Signature: \_\_\_\_\_

**Approval Signatures:**

Primary Signator \_\_\_\_\_ Date: \_\_\_\_\_

Dean/Dept. Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Ofc. Dev. & Phil.: \_\_\_\_\_ Date: \_\_\_\_\_

HSCB Foundation: \_\_\_\_\_ Date: \_\_\_\_\_

**Other Remaining Signator(s) On This Account:**

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

\* If the Primary Signator is no longer on campus, the Dean, Chairman, or appropriate Vice President may request a change of signators.