

## REQUEST TO CREATE A NEW ENTITY ID IN THE ADVANCE DATABASE

Please be sure to search for an existing ID in the database before requesting a new ID.  
 Please allow 3 business days for all new entity requests to be processed.  
 Name & address are required to create entities & a contact person is required for any organization.

University of Florida Foundation, Data Integrity Department

FAX to: (352) 334-8050 OR E-mail to: U.F. Foundation, Data Integrity at [direquest@uff.ufl.edu](mailto:direquest@uff.ufl.edu)

**(\*)Required Information**

### INFORMATION FOR A PERSON ENTITY

\*Full Legal Name: \_\_\_\_\_ Title (i.e. Mr., Ms., Dr., etc.): \_\_\_\_\_  
 Spouse's Legal Name: \_\_\_\_\_ Spouse's Maiden Name: \_\_\_\_\_  
 \*Home Mailing address: \_\_\_\_\_ Apartment: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Phone: \_\_\_\_\_

### PLEASE PROVIDE AS MUCH ADDITIONAL INFORMATION AS POSSIBLE

Preferred Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_ Atl. E-mail address: \_\_\_\_\_  
 Degree Information: \_\_\_\_\_  
 Spouse's Degree Information: \_\_\_\_\_  
 Employer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Employer's Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_

### INFORMATION FOR AN ORGANIZATIONAL ENTITY

\*Full Legal Name: \_\_\_\_\_  
 \*Select one:                      Corporate                      Foundation                      Family Foundation                      Community/Charitable Fund  
 \*Mailing address: \_\_\_\_\_ Suite/Floor: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \*Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Organization's Web Address: \_\_\_\_\_

### SUBMITTED BY

Your Name: \_\_\_\_\_ DO Name: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Campus Address: \_\_\_\_\_  
 Additional Comments: \_\_\_\_\_

Assigned ID: \_\_\_\_\_

Processor's Initials & Date: \_\_\_\_\_