**Academic Affairs**

**FY 2021 Emergent Planning Cycle Budget Proposal Narrative**

**Program/Department:**

**Evaluation Criteria:** Proposals will be evaluated on every aspect of this template. It is highly recommended that the narrative portion touch on each area. Proposals submitted by Deans and AVP’s will be read and scored by the Academic Affairs Budget Advisory Committee (AABAC) using the “Emergent Proposal Scoring Rubric” worksheet. Authors may be asked to present additional information at committee meetings to answer questions and provide clarification.

**Proposal Title:**

[ ] This is a revised version of a previously submitted budget proposal.

 *If box is checked please briefly outline any significant changes and/or indicate why it is being resubmitted.*

**Brief Outline:**

**Statement of Purpose:** *(What is the challenge or opportunity being addressed? How does the proposal address this challenge or opportunity? Limit response to 1 page – please link to any existing reports, data, supplemental materials, etc.)*

Click here to enter text

**Anticipated Outcome(s):**

Click here to enter text

**Metrics:** *(How will outcomes be measured? Please include current data points and goals.*

Click here to enter text

**How does this proposal align with the** [***University’s Strategic Initiatives***](https://www.csuci.edu/president/initiatives/index.htm)**?**

Click here to enter text

**How does this proposal support** *GI 2025 Objectives***?**

Click here to enter text

**What are the consequences of not funding this proposal?**

Click here to enter text

**What alternatives were explored (e.g. existing resources such as CERF, grants, contracts, one time resources)?**

Click here to enter text

**Which units (departments, schools, etc.) will be involved?**

Click here to enter text

**Human Resources, Goods, Services, Equipment, and Travel** *(Complete the table below adding additional rows if necessary)***:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| *Position Title* | *Total Headcount* | *Total FTE* | *Salary and Benefits per FTE* | *Goods and Services* | *Travel* | *Equipment* | *Total Cost* |
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*Note - Please use a benefit factor of 45%*

**Space Requirements:**

**What type of space is needed for this proposal? (e.g., private office, lab space, group**

**work/study space, etc.)**

Click here to enter text

**What features must this space have? (e.g., fume hoods, plumbing, 3-phase power, etc.)**

Click here to enter text

**What needs can be accommodated within your existing space?**

Click here to enter text

**How much new space will be required?**

Click here to enter text