



VALDOSTA STATE UNIVERSITY

STRATEGIC FOCUS 2011 PROPOSAL FORM

Title/Topic: _____

Submitted by: _____ **Date:** _____

Department/College/Division: _____

Strategic Focus Standard (Select 1 or more)

Corresponding Assessment*

- Recruitment/Enrollment of Students** → **# of New Students:** _____
- Retention & Graduation/Enrollment of Students** → **# of Additional Students Retained:** _____
- Scholarship/Research** → **# of Scholarly Activities:** _____
- Financial Solvency Resources** → **\$ Revenue/Savings:** _____

*This is the number or dollar value that is associated with the proposed project. Existing students and efforts should not be included in these figures; only additional students/scholarly activities/dollars (i.e. no double counting).

Brief Proposal Description:

Year 1 Project Budget (Specify dollar amounts and elaborate as needed on summary page):

Item	Description
<input type="checkbox"/> Staff* # _____ Salary and Fringe \$ _____	
<input type="checkbox"/> Travel \$ _____	
<input type="checkbox"/> Operating \$ _____	
<input type="checkbox"/> Equipment \$ _____	
<input type="checkbox"/> Other \$ _____	
<input type="checkbox"/> Space (office, lab, classroom, etc.) _____	
Total \$ _____	

*Note: If personnel are requested for Strategic Focus 2011, [Position Management Forms \(PMF\)](#) must accompany the proposal.

State the amount and source of any supplemental funding sources (e.g., department operating budget, grant):

Total amount requested from the Strategic Focus funding pool for this year: \$ _____

Has a needs assessment been prepared for this proposal? Yes No If yes, submit as supporting documentation.

Has a cost-benefit analysis been prepared for this proposal? Yes No If yes, submit as supporting documentation.

Prior Year Funding (complete this section if the proposal received Strategic Focus 2010 funding):

Has this proposal (or some version of it) been previously submitted to Strategic Focus? Yes No

Did this proposal (or some version of it) receive funding in a prior fiscal year? Yes No If yes, how much \$_____?

If this proposal was funded in a prior fiscal year by the Strategic Focus funding pool, is the required progress report included with this proposal? Yes No

If funding was previously received, state: 1) your original estimated budget, 2) the amount actually expended, and 3) what progress has been accomplished on this proposal:

Duration of Proposal Project:

One –Year Multi –Year (# of Years:_____) Indefinite

(If selecting this option – provide an estimated 5-year budget plan)

Schedule: Expected Time to Completion

Start Date: _____

End Date: _____

Assignment of Responsibility (name and title):

Primary: _____

Secondary: _____

Additional Information:

APPROVALS (Signatures)

Ranking of Proposal

This portion to be completed by approvers following the evaluation of the constituent group.

Approver	Signature	Rank	# of Proposals Forwarded
DEPARTMENT HEAD/DIRECTOR:			
DEAN:			
DEANS' COUNCIL OR EQUIVALENT*:			
VICE PRESIDENT:			
P&B COUNCIL:			

*Deans' Council or equivalent group – submit hard copy with signatures to Vice President.