



## Budget Request Form FY2016

*Department should complete one form for each individual request*

**Department:** Student Organization Finance Center

**Program, Service, or Operation Requested**

*Laserfiche Licensing*

SAFAB Use Only	
YES	NO

**General Description:**

*To assist in the funding for the Laserfiche Online forms system*

**Request Type:**     Full     Increase     One-Time     Partial/Matching

**Type of Funds Requested**     UAF     Other

**General Questions:**

***Why is this important to your department? How does this increase impact students, and what motivated this request?***

This funding request is being made to assist the SOFC by allowing them to pay for the one-time licensing fees for up to 1,000 advisors in the new Laserfiche system. The Laserfiche system is an online document management / financial routing system that will allow advisors access to approve the documents submitted by student leaders electronically, thus reducing the time required for processing documents for payment. This request is being brought forward as a result of the findings identified through student / advisor focus groups in addition to benchmarking with other Universities. The culmination of all feedback received indicated the need for technological solutions to address the antiquated processes currently used by the SOFC.

***Is it part of your strategic plan? What will be the impact if it is not funded?***

Laserfiche is an integral part of our plan to streamline processes in the SOFC office. This program will allow documents to be routed electronically as well as provide virtual storage for the student organization documents. It will remove some of the pressure for student organizations to locate advisors and get to our offices during business hours, thus increasing customer satisfaction. Should the request not be funded, we will have to pass this cost on to each student organization.

**How do other sources of funding (fundraising, sponsorship, reserves, etc.) been considered? Please explain.**

Currently, we do not have any additional funding options to support this request. We have identified approximately \$80,000 to cover the costs associated with the development and building the infrastructure of the system.

**What sort of input did you receive (student, faculty, staff, other) to determine this need?**

Most of our input was derived from students we have spoken with during our focus groups and other individual conversations with advisors/student leaders.

**What actions have you implemented internally to address the identified need?**

We have worked diligently to identify the best system that will offer the appropriate solutions to providing a robust, user friendly online banking solution to meet our customers' needs.

**Generally, what assessment tools will you use to evaluate this program/service?**

We will utilize Student Life Studies to help us create an effective assessment tool that is sent to the student leaders and advisors to collect feedback for continual process improvement.

**Funding Description:**

	Dollar Amount
<b>Total Estimated Cost</b>	
License Fee (1,000 @\$49)	<b>\$49,000.00</b>
<i>Less Estimated Partial/Matching Funds (if applicable)</i>	
<b>TOTAL UAF INCREASE REQUEST</b>	<b>\$49,000.00</b>

SAFAB Comments/Notes: