

Budget Request Form FY 2010

To be Completed by Department for Each Individual Request

Department:Univ. Art Collections			YES	NO
Program, Service, or Operation Requested				
Insurance Premium Increase				
General Description:				
This request will cover the increase in premium for the	ne Fine Arts	Insurance Policy	due both to tra	ansfers of art
to our department and by recent donations of art.				
Request Type:	Full	_XIncrease	One Time	Partial/Matching
General Questions:				
How does this request impact students and what motivated th	is request (nee	eds, strategic plannii	ıg, etc.)?	
Our department has taken on direct responsibility for plus recent major art donations, has required an incr		•	nder Universit	y Center. This,
Have other sources of funding (fundraising, sponsorship, me				
If not funded through SSFAB, we will either fund through the collections. Although there is no industry standa collections at 100%.	•	U	• •	<u> </u>
Generally, what assessment tools will you use to evaluate this	program/serv	ice?		
Not applicable				
Funding Description:				
				Dollar Amount
Total Estimated Cost				\$1,000.00
Less Estimated Partial/Matching Funds (if applicable	e)			
TOTAL SSFAB INCREASE REQUEST				\$1,000.00

SSFAB Comments/Notes: