

## **Budget Request Form FY 2010**

To be Completed by Department for Each Individual Request

| Department:Student Government Association   |  | SSFAB Use Only   |   |  |                     |
|---|--|--|---|--|---------------------|
|   |  | YES  | NO  |  |                     |
|   |  |  |   |  |                     |
| Program, Service, or Operation Requested<br>Reclassification of Business Coordinator I to Business Coordinator II   |  |  |   |  |                     |
| Reclassification of Business Coordinator I to   | Business Coordinator II  |  |   |  |                     |
| General Description:  |  |  |   |  |                     |
| Due to the increased responsibilities and con<br>Business Coordinator I to a Business Coord   |  | e, we are request  | ing additional fund   | ling to reclassify                               | y the               |
| Request Type:   | _XFull   | Increase   | One Time  | Partial/Matc                                     | hing                |
| General Questions:<br>How does this request impact students and who   | at motivated this request (needs   | , strategic plannin  | eg, etc.)?  |  |                     |
| This position works directly with the finance<br>conferences continue to grow, the responsib<br>to improve efficiency and accountability, we<br>requested by the SGA committees for specific<br>expenses are in line with the intent of the re- | ilities of this position also con<br>ill open up 14 new fiscal supp<br>fic programming. This positio | ntinue to grow. T<br>port accounts that<br>n will be respons | his year Student G<br>will be used to all<br>sible for monitoring | overnment, in a ocate funding th g that the comm | n effort<br>nat was |
| Have other sources of funding (fundraising, sp  | oonsorship, membership dues, e   | etc) been considere  | ed? Please explain:   |  |                     |
| We examined our existing budget to try and  | accommodate this request bu  | t were not able to   | o adequatley fund t   | he increase.                                     |                     |
| Generally, what assessment tools will you use t   | to evaluate this program/servicε   | ?  |   |  |                     |
| Our regular budget and audit processes alon<br>also know if we are successful if we are able  |  | ce reviews will b  | e used to evaluate t  | this position. We                                | e will              |
| Funding Description:  |  |  |   |  |                     |
|   |  |  |   | Dollar Am  | ount                |
| Total Estimated Cost  |  |  |   |  |                     |
| Salary Increase   |  |  |   | 3,785.00   | )                   |
| Benefits  |  |  |   | 568.00   |                     |
|   |  |  |   |  |                     |
| Less Estimated Partial/Matching Funds (   |  |  |   |  |                     |
| TOTAL SSFAB INCREASE REQUEST  |  |  |   | 4,353.00   | )                   |

SSFAB Comments/Notes:

## STUDENT | SERVICE | FEE | ADVISORY | BOARD