

Budget Request Form FY2018

Department should complete one form for each individual request

Department: Disability Services	SAFAB Use Only	
Program, Service, or Operation Requested Career Ladder Promotion (SDS II to SDS III)	YES	NO
General Description: Promoting Mr. Joseph Hartsoe from Student Development Sp	ecialist II to Student Develop	ment Specialist

Request Type:	🛛 Full	Increase	One-Time	Partial/Matching
Type of Funds Reque	sted 🖂 U	AF	Other	

General Questions:

How does this address an important need and positively impact students?

Mr. Hartsoe has been an excellent staff member since joining Texas A&M and he will have the points to be promoted on the Career Ladder next fall. Joe serves on many committees on campus related to diversity issues and is a Green Dot facilitator and a member of the Sexual Assault Survivors Committee. Recently, Joe added to his duties as he worked with several other campus entities to develop Aggie Ability Awareness. This program consists of workshops for faculty and staff providing education and awareness about disability issues. There are four fall sessions planned and they have a waiting list for more. The promotion is intended to help Joe continue to develop and expand this program so that we can reach many others (including students) and help continue to evolve the culture at A&M to be accepting of individuals with disabilities.

What department/Division Strategic Plan item does this support?

Disability Services Strategic Plan- Create an inclusive environment for students with disabilities by continuing to develop a social model of disability throughout the department and campus-wide

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Goal 3: Division of Student Affairs- Create an inclusive environment that develops global citizens and leaders who productively engage in a wide spectrum of ideas, perspectives, and cultures

What is the impact if not funded?

Disability Services will fund this promotion but will have less funds to try to continue to build reserves.

Please provide any data, evidence, input (student faculty, staff, other) you gathered to help you determine the need for additional resources. n/a

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

n/a

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

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

DS could pay out of salary savings

Funding Description:

	Dollar Amount
Total Estimated Cost	\$14,864.00
Less Estimated Partial/Matching Funds (if applicable)	
TOTAL INCREASE REQUESTED	\$14,864.00

SAFAB Comments/Notes:

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