ILLINOIS STATE UNIVERSITY

GRADUATE PROGRAMS

Program Proposal Financial Implications Form
For Request for New Program Approval

Purpose: Proposed new graduate programs (degrees, sequences, certificates) must include information concerning how the program will be financially supported to proceed through the curriculum proposal process**.** Signatures of the College Dean and Provost/Provost Representative are required prior to submission of the new program to the College Curriculum Committee.

Procedure: This completed form, with all necessary signatures, is to be attached to new program curricular proposals.

Definition: A "program" at the graduate level can be either a degree, a sequence as part of a degree, or a graduate-level certificate (Graduate Certificate, Post-Baccalaureate Certificate, or Post-Master's Certificate).

Complete the following information:

Department: __Technology_____ Date: _August 29, 2005__

Proposed New Program: Project Management sequence within existing MS in Technology

Person Completing Form: Dan Brown_____ Contact #:_438-2695_____

Complete Table I to show student enrollment projections for the program.

Table I

STUDENT ENROLLMENT PROJECTIONS FOR THE NEW PROGRAM

	1st Year (July – June)	2nd Year	3rd Year	4th Year	5th Year
Number of Program Majors (Fall headcount) (MS/PM Seq)	70/40	70/40	70/40	70/40	70/40
Annual Full-Time-Equivalent Majors (MS/PM Seq)	60/30	60/30	60/30	60/30	60/30
Annual Credit Hours in EXISTING Courses[1]	0	0	0	0	0
Annual Credit Hours in NEW Courses[1]	0	0	0	0	0
(MS/PM Seq) Annual Number of degrees Awarded	35/20	35/20	35/20	35/20	35/20

[1]Include credit hours generated by both majors and non-majors in courses offered by the academic unit directly responsible for the proposed program.

Complete Table II (even if no new funding is requested). Show all required resources including amounts and sources of funds reallocated from other programs or units.

Table II

PROJECTED RESOURCE REQUIREMENTS FOR THE NEW PROGRAM

	1st Year (July – June)	2nd Year	3rd Year	4th Year	5th Year
FTE Staff [1] (FTE)	0	0	0	0	0
Personnel Services ($)	0	0	0	0	0
Equipment and Instructional Needs ($)	0	0	0	0	0
Library ($)	0	0	0	0	0
Other Support Services[2] ($)	0	0	0	0	0

[1]Reflects the number of FTE staff to be supported with requested funds. Not a dollar entry.

[2]Other dollars directly assigned to the program. Do not include allocated support services.

Budget narrative listing projected sources of program funding (including sources of reallocated funds).

The proposed change is name only. All classes required for the proposed sequence are already being taught and are currently required under the concentration by advisement we have had in place for 3 years. We are already taking steps toward managing enrollment to assure that we do not exceed our existing resources for this degree program

Routing and action summary:

1. _____ _____
   Department/School Curriculum Committee Chair   Date Approved

2. _____ _____
   Department Chairperson/School Director   Date Approved

3. _____ _____
   College Dean   Date Approved

4. _____ _____
   Provost/Provost Representative   Date Approved

5. _____ _____
   Teacher Education Council Chairperson   Date Approved

6. _____ _____
   College Curriculum Committee Chairperson   Date Approved

7. _____ _____
   Graduate School   Date Approved

Once approved, please include this form with the curricular proposal for the new program. Please also submit an electronic copy of this form.