

STUDENT SERVICE FEE REQUEST FOR 2018-2019

FISCAL YEAR 2019

Name of Unit: Frontier Fiesta

Dept#: H0224

	FY 2017	FY 2017	FY 2018	FY 2018	FY 2019
Funding Sources	Approved Budget 2016-2017	Actuals 2016-2017	Approved Budget 2017- 2018	Projected Actuals for 2017- 2018	Budget Request for 2018- 2019
Student Service Fees- Base Budget	173,260	173,260	173,260	173,260	173,260
SSF Merit/Salary Increase		-		-	
Student Service Fees Base Augmentation Request					329,849
Student Service Fees One-Time Request			-	-	
Student Service Fees One-Time Additional Request		225,062		341,510	
SSF One Time Fund Equity Rollover				-	
CFWD from Prior Year (Open Commitments)		-		-	
Creation of Business Services Program					
Income From All Other Sources					
State Funding (Fund 1)					
Designated (Fund 2)	9,251	9,251			
Designated (Fund 2)/Sales&Services E&G		-			
Sales & Services Income (Fund 3)	90,000	108,303	90,000	90,000	90,000
Programs/Events Income (Fund 3)		-			
Facility Rental Income (Fund 3)		2,927			
Gifts/Donations (Fund 4)	31,973	23,745	31,973	25,000	25,000
Grants (Fund 5)		-			
Other Income (itemize below)					
Dedicated Fees-Base Budget-Student Center		-			
Dedicated Fees-Base Budget-SC Transformation		-			
Dedicated Fees-Base Budget Recreation Facility		-			
Subtotal of Income	304,484	542,548	295,233	629,770	618,109
Deductions from Income					
Student Fee Waivers-SC		-			
Student Fee Waivers- SC Transformation		-			
Student Fee Waivers- Recreation		-			
Bad Debt		-			
Subtotal of Deductions from Income	0	-	0	0	0
TOTAL INCOME	304,484	542,548	295,233	629,770	618,109

FY17 Fund 3049 Equity returned to Reserve

1,361

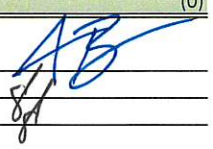
Initials Dept. Head AB
 Initials Completed by 8/8
 Initials Certifying Signatory 8/8

Expenses	Approved Budget 2016-2017	Actuals 2016-2017	Approved Budget 2017- 2018	Projected Actuals for 2017- 2018	Budget Request for 2018- 2019
Salaries and Wages					
Exempt Category Employee Salaries		-			
Non-Exempt Employee Wages		-			
Student Workers Wages (NCWS)		-			
Student Workers Wages (Graduate Students)		-			
Other Temporary Workers Wages		-			
Longevity		-			
Graduate Insurance Stipend		-			
Shift Differential Wages		-			
Overtime Wages		-			
Salaries and Wages Total	0	-	0	0	0

Fringe Benefits	Fringe Benefits Total	-			
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Other Expenses					
Advertising	1,000	1,885	1,000	2,000	2,000
Awards	2,200	-	2,200	1,000	1,000
Business Meals		95			
Clinical/Lab Supplies		-			
Competition Fees		-			
Computer/Hw/Sw Supplies/Repairs		-			
Construction/Renovation		-			
Consulting Services		-			
Cost Of Goods Sold		-			
Facilities Work Orders	11,200	14,303	11,200	14,000	14,000
Financial/Legal/Insurance	12,300	843	12,300	1,000	1,000
Office/General Supplies		182		200	200
Other Expense		-			
Parts/Furniture		329		0	0
Printing/Postal/Freight	900	2,578	900	2,500	2,500
Professional Development		-			
Programs/Events	172,148	280,119	158,924	384,875	373,458
Prospective/New Employee		-			
Rental/Lease	37,096	71,225	41,069	72,000	72,000
Repairs/Maintenance		523		0	0
Scholarships/Stipends	6,000	5,000	6,000	6,000	6,000
Security Services	5,000	36,212	5,000	66,500	66,500
Services		-			1,500
Student Leadership Stipend	39,340	32,456	39,340	39,340	39,340
Teaching Food		-			
Teaching Supplies		-			
Telecom Services/Supplies	900	2,679	900	2,679	2,679
Temporary Staffing		-			
Travel		368			
Travel/Guest		-			
Travel/Student		-			
Uniforms	800	-	800	1,000	1,000
Utilities		-			
Other Itemized					
Projects-Furniture & Equipment CAPITAL		-			
Projects-Construction (equity transfer)		-			
Debt Service		-			
Deferred Maintenance / Reserve		66,938			
Transformation - CIP		-			
Admin Charge (6% of Total Expense)	15,600	25,452	15,600	36,676	34,932
Bad Debt Expense		-			
Other Expenses Total	304,484	541,187	295,233	629,770	618,109
TOTAL EXPENSE	304,484	541,187	295,233	629,770	618,109
BALANCE (Income less Expenses)	0	1,361	0	(0)	(0)

Initials Dept. Head _____
 Initials Completed by _____
 Initials Certifying Signatory _____



APPROVALS:

To the best of my knowledge this report is accurate and reflects the unit's priorities. The figures provided have been checked and verified.
(print names & UH affiliation next to all signatures.)

Signature of ^{organization chair} Department Head:

Title:

Date:

Other AVP Required Signatures/Dates

Form Completed By:

Certifying Signature & Date:

8/18/2017