## ESTABLISHMENT AND REVIEW OF CENTERS AND INSTITUTES POLICY

Approved by Administrative Council 11/2/15

- Mission Statement
- Need: Justification that the proposed Center or Institute meets a need currently not being met elsewhere within the University and/or provides an enhancement to an existing program.
- Contribution to the mission of the University: Describe the relevance of the Center or Institutes mission including any impact upon the existing Departments, Colleges, Centers, or Institutes.
- Contribution to the University Strategic Plan.
- Activities, objectives and goals: Provide a list of the specific goals and objectives.

#### **Organization Structure**

- Personnel: Provide the name of the proposed Center or Institute Director and why that person was chosen for the position. Include the CV of the proposed Director.
- Provide a list of the individuals who will make up the proposed Center or Institute including their role, their expertise to carry out that role, and the permission of their division head to participate in the proposed Center or Institute.
- Oversight Committee: Description of any proposed advisory or policy boards and the criteria for appointments to the board, including terms and roles.
- Organization Chart: An organizational chart showing a) the internal organization of the proposed Center or Institute, and b) the relationship of the proposed Center or Institute to the existing organization.

#### **Space and Facilities Requirements**

• Identify the current space, facilities and capital equipment that have been secured for the operation of the Center or Institute and realistic projections of future needs.

#### **Funding and Budget**

• Funding Sources: Provide sources and amount of funding anticipated. Include proof of funding sources (e.g., grants, college or university commitment, letters of intent

### APPENDIX A

## Proposal to Establish a Center or Institute SIGNATURE PAGE

The attached proposal identifies the purpose, justification, resource streams and expenditures for a proposed Center or Institute. Your signature affirms your support to the Center or Institute.

Name of Center/Institute		
Center/Institute Director		
Name	Signature	 Date
Dean(s) and/or Chancellor(s)		
Name	Signature	Date
Name	Signature	 Date

## APPENDIX A

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	December 14. Establish a Contact on Inc	A°AA
	Proposal to Establish a Center or Ins The following decision has been ma	
	C / A DDD OVED	
	Center/Institute APPROVED	
	Center/Institute APPROVED  Center/Institute DENIED	

Date

Date



### CENTER AND INSTITUTE BIENNIAL REPORT

Please provide the following information. Do not exceed 6 pages. Director shall submit the report to the appropriate Dean(s)/Chancellor(s).

NAME OF CENTER/INSTITU TE					
Year Established		Website A	ddress		
CENTER/INSTITUTE DIRECTOR					
Name			Title		
Email			Phone		
UNIT AFFILIATION	i(S)				
Name (Dean/Chancellor)			Title		
Email			Phone		
Campus					
DATE REPORT SUB	MITTED				

#### I. Mission Statement

Provide the mission statement of the Center or Institute.

#### II. Relevancy to the Mission

Explain how the work of the Center or Institute remains relevant to the mission of the College(s) and University.

#### III. Relevancy to University Strategic Plan

Explain how the work of the Center or Institute ties into the University Strategic Plan.

#### IV. Goals and Objectives

Provide a list of the specific goals of the proposed Center/Institute and describe how the goals have been met or an explanation about how they were modified and the new goals were met.



#### V. Interaction with Internal and External Entities

List the unit and faculty at Roseman and any external entities that the proposed Center or Institute interacts with and provide information about the effectiveness of these interactions.

#### VI. Anticipated Changes

Describe major changes anticipated during the next two years including the following:

- A. Mission and Goals
- B. Size of Center or Institute (changes in number of personnel, space)
- C. Budget (include internal and external support)
- D. Organization Structure

#### VII. Performance Measures/Outcomes

Provide the following information for each fiscal year included in this review period.

#### A. Personnel

Name of faculty, staff and students indicating percent of time associated with the Center or Institute.

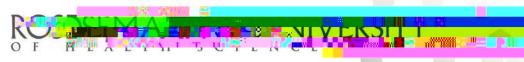
Personnel	Effort

#### **B.** Community Outreach

Describe the Center or Institute's community outreach and service.

#### C. Funding (received during each fiscal year included in this review period)

Funding: Contracts & Grants	Year 1	Year 2
Grants and Contracts		
(Source and Amount)	NI	
Gifts/Donations		
Indirect Cost Recovery		
University Allocation		
Cost Sharing	1100	/ \
Patent and Licensing Revenue		0.7
Other	2277 5	



**Total Support** 



### D. Expenditures

<b>Budget Category</b>	Year 1	Year 2
Personnel		
Travel		
Equipment		
Materials and Supplies		
Other		
Total		

#### **Publications and/or Presentations** E.

List any journal articles, books, papers, reports, presentations, etc.

#### F. **Inventions, Patents, Licenses**

List invention disclosures, patent applications, patents received, and licenses providing appropriate details.

#### G. **Other Measures**

List any other evidence of the productivity of the Center or Institute.



# Biennial Review of Center or Institute SIGNATURE PAGE

Name of Center/Institute		
Center/Institute Director		
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Name		Signature		Date	

Review of Center or Institute The following decision has been made:		
	Center/Institute APPROVAL FOR YEARS	
	Center/Institute to be DISBANDED	

Date of Adm	inistrative (	Council Appro	oval
Date			