**NDSU Student Technology Fee Action Plan Request**

**Instructions**

A Student Technology Fee Action Plan Request must consist of the following sections in the order given. Each page should be numbered sequentially.

* **Request forms are to be delivered to Marc Wallman, VP for IT, QBB 206. Questions may be addressed to** [**rian.nostrum@ndsu.edu**](mailto:rian.nostrum@ndsu.edu) **or** [**cece.rohwedder@ndsu.edu**](mailto:cece.rohwedder@ndsu.edu)
* **We will only accept for consideration Student Technology Fee Action Plan Request forms which are fully completed and signed according to the guidelines listed below.**
* **Request forms will be opened and reviewed after the submission deadline.**

**Please use the following guidelines when completing this form:**

**I. Action Plan Introduction and Authorizations**

1. NDSU Organization or Unit: Enter the name of the official NDSU organization submitting the project request.
2. Title of Project: Give a one-line title of the proposed project.
3. Project Duration: List the month and year on which the project will begin and end. The maximum length of a project is three years.
4. Total Technology Fee Request: List the total amount being requested from the Technology Fee; use line K from the Budget form.
5. Project Director(s): Include name, campus address, phone #, fax #, and e-mail address of the individual who will direct this project. Project directors must be NDSU faculty or staff and must not have past due reports on previously awarded projects, as of the current submission deadline date.
6. Signatures:
7. Type or print the names of the project director(s) and unit head, and have those individuals sign and date the form.
8. Type or print the name of the NDSU IT Division consultant who has reviewed the Action Plan and has determined that it can be supported, and have him/her sign and date the form. If you are not sure how to arrange for this consultation, please contact the Office of the Vice President for IT at 231-5646 or [cece.rohwedder@ndsu.edu](mailto:cece.rohwedder@ndsu.edu) before submitting your Action Plan.
9. Executive Summary: Describe in 175 words or less the technology need that is being addressed, how it will be addressed, and the expected outcome.

**II. Project Overview**

The project overview section contains questions routinely asked by TFAC members during the review process. If any sections do not pertain to this proposal, please explain why.

**III. Project Description**

The Project Description should be no more than five pages in length and should include the following information:

1. A full, clear description of project. This description should address
   * 1. the project background –how it came to fruition,
     2. the technology need the project will address,
     3. how this project will remedy that need,
     4. the outcome once the need is addressed, and
     5. the number of students that will benefit.
2. A clear description of how the expertise, equipment, and resources available to the project team, along with the funds requested, will address this need.

**IV. Milestones**

List the milestones for the project and the expected date each milestone will be completed. For each milestone, briefly describe the expected outcome and means of assessing a successful outcome.

**V. Supporting documentation**

Supporting documentation, such as outside reviewer's comments and department or administrative endorsement, may be appended to the Action Plan Request.

**VI. Budget**

1. NDSU Organization or Unit: Enter the name of the official NDSU organization submitting the action plan.
2. Project Director(s): Include name(s) of the individual(s) who will direct this project.
3. Salaries and Wages: By category, include number of personnel employed, months employed and the funds requested.
4. Total Salaries and Wages: This is a formula field and will automatically calculate.
5. Fringe Benefits: Use the following rates: Staff = 30%; Graduate and Undergraduate Students enrolled in classes during the work period = 1-2%; Graduate and Undergraduate Students not enrolled in classes during the work period (for example students working but not taking classes during the summer) = 10%.
6. Total Salary, Wages and Benefits: This is a formula field and will automatically calculate.
7. Equipment: List the total amount of equipment costs.
8. Materials and Supplies: List the total amount of materials and supplies.
9. Total Technology Fee Request: This is a formula field and will automatically calculate.
10. Match: State the amount of match your organization/unit will provide; describe this match in the Budget Match section.
11. Total Project Expenditure: This is a formula field and will automatically calculate.

**VII. Budget Justification**

The Budget Justification should explain how the totals on the Budget section were derived and a justification for the need of each expense. It should include an itemization of Equipment and Materials and Supplies and the estimated cost for each item.

**VIII. Budget Match**

The Budget Match should include an itemized description of the budget match your organization/unit will provide and information on all attempted and actual matches.

|  |
| --- |
| **Project Directors will receive an email indicating whether the Technology Action Plan Request they submitted was approved or not and must officially accept the award via email.**  **The subsequent award letter will include information on how the awarded funds will be made available, whether additional information is needed prior to use of awarded funds, and the reporting requirements.** |

**NDSU Student Technology Fee Action Plan Request**

**I. Action Plan Introduction and Authorizations**

|  |  |  |
| --- | --- | --- |
| **NDSU ORGANIZATION OR UNIT** | | |
| **TITLE OF PROJECT** | | | | |
| **Project Duration (3 years maximum)** | **From:** | | **To:** | |
| **Type of Project (Check one)** | **New** | **Previously Submitted** | | **Renewal** |
| **Total Technology Fee Request** | | | | |
| **Project Director**  **(Must be NDSU faculty or staff)** | **Campus Address:**  **Phone:**  **Fax:**  **E-mail:** | | | |
| **Name (Type or Print)** | **Signature** | | **Date** | |
| **Project Director** |  | |  | |
| **Unit Head** |  | |  | |
| **IT Division Consultant** | **Signature** | | **Date** | |

**Executive Summary (maximum of 175 words)**

|  |
| --- |
|  |

**The Technology Fee Advisory Committee will only accept for consideration Student Technology Fee Action Plan Request forms which are fully completed and signed, and whose Project Directors have no past due reports on previously awarded projects as of the current submission deadline date, according to the guidelines listed in the Instructions, pages 1 and 2.**

**Technology Action Plan Request forms will be opened and reviewed after the submission deadline.**

**NDSU Student Technology Fee Action Plan Request**

**II. Project Overview**

1. **How does this project meet student needs?**
2. **What audience does this project directly serve? What audience is indirectly served? How many students are affected?**
3. **For projects that target a subset of NDSU’s students, please describe the possibility for broader application in the future.**
4. **Describe both the immediate and long term impact of this project.**
5. **Who will pay for ongoing expenses following the technology fee funded portion of this project (e.g., who will replace hardware or software after it has reached its end of life)?**
6. **Describe how this project will follow NDSU’s best practices in information technology. (Please make sure the NDSU IT Division staff you consulted signs in Part I of this form.)**
7. **What service on campus is most similar to the one proposed here? How does this project differ?**

**NDSU Student Technology Fee Action Plan Request**

**III. Project Description (5 pages maximum)**

**Include information on the background of this project: how did it come to fruition?**

**NDSU Student Technology Fee Action Plan Request**

**IV. Milestones**

List the date for each project milestone. These milestones should represent the ***significant*** accomplishments that will be associated with the action plan. For each milestone, please indicate its expected outcome and the means for assessing that outcome. (The table may be extended as needed.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Date** | **Milestone** | **Expected Outcomes** | **Means of Assessment** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
| **5.** |  |  |  |  |

**NDSU Student Technology Fee Action Plan Request**

**V. Supporting Documentation**

****

**NDSU Student Technology Fee Action Plan Request**

**VII. Budget Justification**

Describe how you arrived at the budget totals in Section VI, Budget.

You are expected to follow all applicable university policies and procedures regarding salary expenditures.

You are expected to follow the state-approved purchasing guidelines when purchasing materials and supplies.

* Equipment: List name, estimated cost and quantity of each item and explain why it is important to the project. Include installation and maintenance costs in your estimates.
* Materials and Supplies: List name, estimated cost and quantity for each non-equipment items and explain why it is important to the project.

**NDSU Student Technology Fee Action Plan Request**

**VIII. Budget Match**

Attempted Budget Matches:

Actual Budget Matches:

Additional Budget Match information: