

<b>AGENCY NAME:</b>	Francis Marion University		
<b>AGENCY CODE:</b>	H18	<b>SECTION:</b>	17



## Fiscal Year 2015-16 Agency Budget Plan

### FORM A – SUMMARY

<b>RECURRING FUNDS (FORM B DECISION PACKAGES)</b>	<b>My agency is submitting the following recurring decision packages (Form B):</b> 3070, 3089, 3092, 3141, 3144, 3147	
	<b>For FY 2015-16, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting a net increase in recurring General Fund appropriations.
	<input type="checkbox"/>	Not requesting a net increase in recurring General Fund Appropriations.


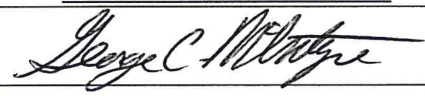
<b>CAPITAL &amp; NON-RECURRING FUNDS (FORM C DECISION PACKAGES)</b>	<b>My agency is submitting the following one-time decision packages (Form C):</b> 3083	
	<b>For FY 2015-16, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting capital and/or non-recurring funds.
	<input type="checkbox"/>	Not requesting capital and/or non-recurring funds.

<b>PROVISOS</b>	<b>For FY 2015-16, my agency is (mark "X"):</b>	
	<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
	<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
	<input checked="" type="checkbox"/>	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
<b>PRIMARY CONTACT:</b>	John J. Kispert	843.661.1110	<a href="mailto:jkispert@fmarion.edu">jkispert@fmarion.edu</a>
<b>SECONDARY CONTACT:</b>	R. Thomas Welch	843.661.1136	<a href="mailto:rwelch@fmarion.edu">rwelch@fmarion.edu</a>

I have reviewed and approved the enclosed FY 2015-16 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

<b>SIGN/DATE:</b>	 <b>Agency Director</b>	 <b>Board or Commission Chair</b>
	<b>TYPE/PRINT NAME:</b> Dr. Luther F. Carter, President	Mr. George McIntyre, Board Chairman

*This form must be signed by the department head – not a delegate.*

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**FORM B – PROGRAM REVISION REQUEST**

<b>DECISION PACKAGE</b>	<b>3070</b>
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*Provide the decision package number issued by the PBF system (“Governor’s Request”).*

<b>TITLE</b>	<b>2015-16 Budget Realignment Request</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$0</b>
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*What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package’s total in PBF across all funding sources.*

<b>ENABLING AUTHORITY</b>	<p><i>SC Code of Law Section 59-133-30 (13) provides that of the powers of the Francis Marion University Board of Trustees the Board and University, under the purview of the Board has the authority and power to adopt measures for the proper operation of the University. This Program Revision Request is in accordance to that authority and is not a revision to the University and its Board’s Authority.</i></p>
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*What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<input type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input checked="" type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
	<input type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input type="checkbox"/> Proposed establishment of a new program or initiative.
	<input type="checkbox"/> Loss of federal or other external financial support for existing program.
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	<p>This is a realignment of expenditures of current programs. This realignment will impact budgets for other operating, salary and fringe costs for Education and General Programs as well as Auxiliary Programs.</p>
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*What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?*

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**RELATED REQUEST(S)** N/A

*Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?*

**MATCHING FUNDS** N/A – this is realignment not a request for additional funds. No Matching fund criteria will be impacted by this realignment.

*Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.*

**FUNDING ALTERNATIVES** N/A

*What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.*

**SUMMARY** The Appropriation Act outlines the budget for Francis Marion University. While the budget overall has been materially close to expenses of the University, this realignment will better align the Appropriation Act with actual expenses of the University by Commitment Line Item to report a more accurate picture of the University and its cost of operations.

*Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency’s security or technology plan.*

**METHOD OF CALCULATION** Appropriation Act Commitment Line Items were reviewed and adjusted to better align with actual cost of the previous fiscal year where possible.

*How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?*

**FUTURE IMPACT** There will be no further obligation to the State by adopting this decision package.

*Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?*

**PRIORITIZATION** This is a realignment request that request no new funding.

*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

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<b>INTENDED IMPACT</b>	No intended impact. This is merely a realignment of the appropriation act with actual expenditures of the University.
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	This request is a realignment of cost. Evaluation of services will be in accordance with existing performance measures currently utilized by the University in its current Accountability Report.
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*

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**FORM B – PROGRAM REVISION REQUEST**

<b>DECISION PACKAGE</b>	<b>3089</b>
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*Provide the decision package number issued by the PBF system (“Governor’s Request”).*

<b>TITLE</b>	<b>Student Academic System Computer Software – Annual Licensing, Maintenance, &amp; Operation Fees</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$750,000.00</b>
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*What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package’s total in PBF across all funding sources.*

<b>ENABLING AUTHORITY</b>	<p><i>SC Code of Law Section 59-133-30 (13) provides that of the powers of the Francis Marion University Board of Trustees the Board and University, under the purview of the Board has the authority and power to adopt measures for the proper operation of the University. This Program Revision Request is in accordance to that authority and is not a revision to the University and its Board’s Authority.</i></p> <p><i>What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?</i></p>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<input type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – requires pre-approval.
	<input type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative.
<input type="checkbox"/> Loss of federal or other external financial support for existing program.	
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	<p><i>These funds are projected to be used to fund licensing, maintenance, and operations of the Student Academic System Computer Software. Significant portions of this request will be remitted to the software vendor which initially provides the Student Academic System Computer Software for its continuing support of the University and its operation of the system. The remainder will be used to support salaries and employer contributions for qualified In-house information technology specialist essential for day to day support of the system and liaison with the software vendor.</i></p> <p><i>What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?</i></p>
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**RELATED REQUEST(S)** 3083

*Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?*

**MATCHING FUNDS** Currently, the University has not allocated or identified any potential matching funds for this request.

*Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.*

**FUNDING ALTERNATIVES** Currently, there are no other funding sources identified.

*What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.*

**SUMMARY**

**Francis Marion University:** Located in the center of the Pee Dee region, Francis Marion University is a public regional university offering baccalaureate and graduate degrees. Total enrollment in Fall 2012 was 4,093 (95% of which was in-state). FMU has strong undergraduate programs in the Arts and Sciences, especially in Biology, Physics, and Chemistry, and excellent undergraduate and graduate programs in Nursing, Psychology, Business, and Education. Francis Marion recently started a baccalaureate degree program in Industrial Engineering, and beginning in Fall 2016, the University will add a Physician Assistant master's program to its offerings.

**Technology Support:** Through such initiatives as its RN to BSN program, its new Industrial Engineering program, its Family Nurse Practitioner program, and the Physician Assistant program, Francis Marion University is making a concerted and effective effort to address the workforce development needs of the region and the state. In support of these programmatic initiatives, the University is moving prerequisite courses online, which requires more technology and technology support. The FMU School of Business and School of Education have also moved their graduate degree offerings (MBA, M.Ed., and MAT) online, and the Department of Nursing has moved its RN to BSN courses online.

Furthermore, the University is planning a major upgrade to its Student Academic System computer software. Implementation of the new software package will yield important benefits to students, faculty, and others, but it will place heavy demands on the University's computer support personnel. Accordingly, Francis Marion is seeking a \$750,000 recurring appropriation to cover annual maintenance expenses, annual licensing fees, and external support costs for the new Student Academic System computer software package.

*Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.*

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<b>METHOD OF CALCULATION</b>	<p>Funds requested were based on current market cost of student academic system computer software annual license fees and maintenance cost. Factors that could cause deviation in the request and actual cost are changes in the cost of annual license fees and maintenance. Many software vendors offer low initial annual fees and then as the system ages fees are escalated. While this request attempts to take into consideration the possibility for increase in cost that will occur between the time of this request and when these funds may actually be received and procurement of such system software; however, this cost is the most subject to change of the funded costs of this request.</p>
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*How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?*

<b>FUTURE IMPACT</b>	<p>As stated in the method of calculation, should annual cost of system software annual cost escalate above this request the University will be obligated to fund the difference. It is the goal of the University that savings from efficiencies of the new software over the operations of the University will offset future cost escalations should any be incurred.</p>
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*Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?*

<b>PRIORITIZATION</b>	<p>While the University would prefer to implement this system in FY2015-16; should new funds be insufficient or unavailable, the University will likely defer action on this project until funding for capital outlays and annual operational cost can sufficiently be covered.</p>
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*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

<b>INTENDED IMPACT</b>	<p>Once the system software is in place and operational we intend for an immediate impact to our operations. Our current academic system software was developed internally and has been used by the University since its creation in 1970. It is the University's intent that this software will allow for faster and efficient enrollment of students in addition to increased, improved, and more timely reporting capabilities for management of the University.</p>
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	<p>The use of these funds would be evaluated on the basis of system performance, the timeliness of customer support provided by the software vendor, timeliness of the customer support provided by internal staff, and the minimization of down time or system failures.</p>
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*



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## FORM B – PROGRAM REVISION REQUEST

<b>DECISION PACKAGE</b>	<b>3092</b>
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*Provide the decision package number issued by the PBF system ("Governor's Request").*

<b>TITLE</b>	<b>Pee Dee Industry Technical Support Network</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$250,000.00</b>
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*What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package's total in PBF across all funding sources.*

<b>ENABLING AUTHORITY</b>	<p><i>SC Code of Law Section 59-133-30 (13) provides that of the powers of the Francis Marion University Board of Trustees the Board and University, under the purview of the Board has the authority and power to adopt measures for the proper operation of the University. This Program Revision Request is in accordance to that authority and is not a revision to the University and its Board's Authority.</i></p>
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*What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<input type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
	<input type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative.
	<input type="checkbox"/> Loss of federal or other external financial support for existing program.
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	<p>Funds for this program would primarily support faculty and staff associated with the Network who would be conducting research for industry of the Pee Dee. Other operating cost will also be incurred with payment to multiple vendors and contractors in accordance with the State Procurement.</p>
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*What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?*



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<b>RELATED REQUEST(S)</b>	N/A
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*Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?*

<b>MATCHING FUNDS</b>	Currently there are no planned matching funds to be devoted to this program or program income to be derived from the program.
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*Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.*

<b>FUNDING ALTERNATIVES</b>	Currently there are no available alternative funding sources identified for this Community Service Program.
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*What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.*

<b>SUMMARY</b>	<p>Francis Marion University plans a cooperative effort between the FMU Education Foundation and the FMU School of Business that will provide critical information and analysis designed to retain and expand current business and industry in the Pee Dee region. In addition to providing assistance to existing industrial partners, the program will provide services that will encourage new industries to locate to the region.</p> <p>Francis Marion School of Business faculty members will produce regular reports—based on local, regional, state, and national data—that will benefit current and potential members of the Pee Dee business and industrial community. This program will generate original applied research, compilation of data, and periodic economic analysis and forecasts that will assist the commercial, industrial, and business organizations located in northeastern South Carolina. Faculty members drawn from the disciplines of management, accounting, economics, finance, and marketing will be involved in working with area businesses and industries to develop practical solutions and approaches to the challenges and opportunities they face.</p> <p>To support this important economic development initiative, Francis Marion University respectfully requests a recurring appropriation of \$250,000. These funds will provide the resources needed to plan and carry out a robust research and reporting effort, and to develop the specific strategies required to support, retain, and expand current business and industry while assisting economic development partners in recruiting new business and industry to a region of the state in desperate need of workforce opportunities for our citizens.</p>
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*Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.*

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<b>METHOD OF CALCULATION</b>	<p>The most likely deviation of the actual cost of service and the requested funding of the program will likely come from the demand of the service provided. While the University has concluded that this service is needed, available to be rendered, and within the mission of the University, the demand of such service is the variable highly subject to deviation from the level assumed to be provided by this request for funding.</p>
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*How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?*

<b>FUTURE IMPACT</b>	<p>If this request is approved, there will be no further obligation for the state. While this request is for operational funding, facilities and infrastructure for this service will be provided from current resources and facilities used by the University. The addition of this program will not have a negative impact on the provision of current service levels of other programs of the University.</p>
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*Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?*

<b>PRIORITIZATION</b>	<p>While the University would prefer to implement this program in FY2015-16; should new funds be insufficient or unavailable, the University will likely defer action on this project until funding for operational cost can sufficiently be covered.</p>
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*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

<b>INTENDED IMPACT</b>	<p>This program is intended to increase the University's Community Service efforts. This program will begin delivery of service within the first fiscal year and will actively seek to use provided funding in the most efficient and effective manner to provide the most impact on the community, industry of the Pee Dee, and the State.</p>
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	<p>Efficiency and effective usage of funding will be evaluated on the basis of customer's served, customer satisfaction, and hours of research provided to industry partner's subscribing to the program.</p>
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*

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**FORM B – PROGRAM REVISION REQUEST**

<b>DECISION PACKAGE</b>	3141
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*Provide the decision package number issued by the PBF system (“Governor’s Request”).*

<b>TITLE</b>	Appropriation – Health and Pay Plan Increase
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	\$398,608
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*What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package’s total in PBF across all funding sources.*

<b>ENABLING AUTHORITY</b>	2014-15 Appropriation Act
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*What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<input checked="" type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input type="checkbox"/> Proposed establishment of a new program or initiative.
	<input type="checkbox"/> Loss of federal or other external financial support for existing program.
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	Funds will be used to support Appropriation funded Classified and Unclassified employees of the University and the related Employer Contributions for Pay Plan and Health Insurance Increases provided in FY2014-15.
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*What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?*

<b>RELATED REQUEST(S)</b>	3144 – Other Fund Change – Health and Pay Plan Increase 3147 – Federal Fund Change – Health and Pay Plan Increase
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*Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?*

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**MATCHING FUNDS** No matching fund requirements are associated with this Base Adjustment.

*Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.*

**FUNDING ALTERNATIVES** This request is to adjust/allocate appropriations received in FY 2014-15 as a recurring base appropriation adjustment.

*What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.*

**SUMMARY** This decision package is to memorialize the receipt of a base adjustment for Health Insurance and Pay Plan Increase to the FY14-15 appropriation act and to allocate receipt of such base adjustment accordingly. Receipts of these funds are not currently reflected as Base adjustments for FY15-16 entered by the Executive Budget Office prior to the development of the University budget.

*Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.*

**METHOD OF CALCULATION** Calculation of amount was provided by the Executive Budget Office on August 22, 2014. Funds were allocated across personal service commitment items and employer contributions in proportion to current base appropriation of such cost.

*How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?*

**FUTURE IMPACT** This is a state mandate receipt of appropriated funds. There are no other future obligations noted at this time.

*Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?*

**PRIORITIZATION** This is a base adjustment / allocation of state appropriated funding received in FY 2014-15.

*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

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<b>INTENDED IMPACT</b>	There is no impact intended for this decision packet. This is merely to memorialize the adjustment to recurring appropriations.
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	This request is a change in the cost of providing current services. Funds will be evaluated based on existing performance criteria established by the University.
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*

<b>AGENCY NAME:</b>	Francis Marion University		
<b>AGENCY CODE:</b>	H18	<b>SECTION:</b>	17

**FORM B – PROGRAM REVISION REQUEST**

<b>DECISION PACKAGE</b>	<b>3144</b> <i>Provide the decision package number issued by the PBF system (“Governor’s Request”).</i>
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<b>TITLE</b>	<b>Other Fund Change – Health and Pay Plan Increase</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>\$404,069</b> <i>What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package’s total in PBF across all funding sources.</i>
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<b>ENABLING AUTHORITY</b>	2014-15 Appropriation Act provided for a 2% pay plan increase per proviso 101.21 and health insurance employer contributions increases. The Executive Budget Office is directed per proviso 112.2 to review request for increase in other fund authorizations related the pay plan increase.  <i>What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<input type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input checked="" type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input type="checkbox"/> Proposed establishment of a new program or initiative.
	<input type="checkbox"/> Loss of federal or other external financial support for existing program.
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	Funds will be used to support other funded Classified and Unclassified employees of the University and the related Employer Contributions for Pay Plan and Health Insurance Increases provided in FY2014-15. While a portion of this decision package will realign existing resources to cover the change in cost new authorization is requested cost in excess of existing authorization.  <i>What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?</i>
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<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
<b>AGENCY CODE:</b>	<b>H18</b>	<b>SECTION:</b>	<b>17</b>

<b>RELATED REQUEST(S)</b>	<p>3141 – Appropriations – Health and Pay Plan Allocation  3147 – Federal Fund Change – Health and Pay Plan Increase</p> <p><i>Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?</i></p>
<b>MATCHING FUNDS</b>	<p>There are no matching requirements for this request.</p> <p><i>Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.</i></p>
<b>FUNDING ALTERNATIVES</b>	<p>There are currently no funding alternatives identified for this cost increase.</p> <p><i>What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.</i></p>
<b>SUMMARY</b>	<p>This decision package is to request an expansion of authorization of other funds to fund salary and employer contribution cost increases associated with the 2% pay plan increases and health insurance increases outlined in the 2014-15 Appropriation Act.</p> <p><i>Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.</i></p>
<b>METHOD OF CALCULATION</b>	<p>This amount was estimated based on current other fund expenditures for salary and employer contributions related to the 2% pay increase as well as the increase in health insurance employer contributions.</p> <p><i>How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?</i></p>
<b>FUTURE IMPACT</b>	<p>There are no anticipated obligations of the state by adopting this decision package.</p> <p><i>Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?</i></p>



<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
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<b>PRIORITIZATION</b>	<p>The University anticipates generating new revenue to sufficient cover all additions to authorization approved by this decision package. This request cannot be deferred due to the Appropriation Act mandating the increase in cost.</p>
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*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

<b>INTENDED IMPACT</b>	<p>There is no impact intended for this decision packet. This is merely to memorialize the adjustment cost of providing existing services due to increases in personnel cost and employer contributions related to the 2% pay plan and health insurance increases allowed by the 2014-15 Appropriation Act.</p>
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	<p>This request is a change in the cost of providing current services. Funds will be evaluated based on existing performance criteria established by the University.</p>
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*

<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
<b>AGENCY CODE:</b>	<b>H18</b>	<b>SECTION:</b>	<b>17</b>

**FORM B – PROGRAM REVISION REQUEST**

<b>DECISION PACKAGE</b>	<b>3147</b>
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*Provide the decision package number issued by the PBF system (“Governor’s Request”).*

<b>TITLE</b>	<b>Federal Fund Change – Health and Pay Plan Increase</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$0</b>
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*What is the net change in requested appropriations for FY 2015-16? This amount should correspond to the decision package’s total in PBF across all funding sources.*

<b>ENABLING AUTHORITY</b>	2014-15 Appropriation Act provided for a 2% pay plan increase per proviso 101.21 and health insurance employer contributions increases. The Executive Budget Office is directed per proviso 112.2 to review request for increase in other fund authorizations related the pay plan increase.
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*What state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority?*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<input type="checkbox"/> (Base Adjustment) Allocation of statewide employee benefits.
	<input checked="" type="checkbox"/> (Base Adjustment) Realignment within existing programs and lines.
	<input type="checkbox"/> (Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience.
	<input type="checkbox"/> Change in case load / enrollment under existing program guidelines.
	<input type="checkbox"/> Non-mandated change in eligibility / enrollment for existing program.
	<input type="checkbox"/> Non-mandated program change in service levels or areas.
	<input type="checkbox"/> Proposed establishment of a new program or initiative.
	<input type="checkbox"/> Loss of federal or other external financial support for existing program.
<input type="checkbox"/> Exhaustion of fund balances previously used to support program.	

<b>RECIPIENTS OF FUNDS</b>	Funds will be used to support federal funded Classified and Unclassified employees of the University and the related Employer Contributions for Pay Plan and Health Insurance Increases provided in FY2014-15. This request is a realignment of funds and will use existing resources provided.
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*What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?*

<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
<b>AGENCY CODE:</b>	<b>H18</b>	<b>SECTION:</b>	<b>17</b>

<b>RELATED REQUEST(S)</b>	<p>3141 – Appropriations – Health and Pay Plan Allocation  3144 – Other Fund Change – Health and Pay Plan Increase</p> <p><i>Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?</i></p>
<b>MATCHING FUNDS</b>	<p>There are no matching requirements for this request.</p> <p><i>Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.</i></p>
<b>FUNDING ALTERNATIVES</b>	<p>There are currently no funding alternatives identified for this cost increase.</p> <p><i>What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.</i></p>
<b>SUMMARY</b>	<p>This decision package is to request an expansion of authorization of federal funds to fund salary and employer contribution cost increases associated with the 2% pay plan increases and health insurance increases outlined in the 2014-15 Appropriation Act.</p> <p><i>Provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.</i></p>
<b>METHOD OF CALCULATION</b>	<p>This amount was estimated based on current federal fund expenditures for salary and employer contributions related to the 2% pay increase as well as the increase in health insurance employer contributions.</p> <p><i>How was the amount of the request calculated? What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?</i></p>
<b>FUTURE IMPACT</b>	<p>There are no anticipated obligations of the state by adopting this decision package.</p> <p><i>Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?</i></p>

<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
<b>AGENCY CODE:</b>	<b>H18</b>	<b>SECTION:</b>	<b>17</b>

<b>PRIORITIZATION</b>	<p>The University anticipates generating new revenue to sufficient cover all additions to authorization approved by this decision package. This request cannot be deferred due to the Appropriation Act mandating the increase in cost.</p>
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*If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2015-16?*

<b>INTENDED IMPACT</b>	<p>There is no impact intended for this decision packet. This is merely to memorialize the adjustment cost of providing existing services due to increases in personnel cost and employer contributions related to the 2% pay plan and health insurance increases allowed by the 2014-15 Appropriation Act.</p>
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*What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?*

<b>PROGRAM EVALUATION</b>	<p>This request is a change in the cost of providing current services. Funds will be evaluated based on existing performance criteria established by the University.</p>
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*How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?*

<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
<b>AGENCY CODE:</b>	<b>H18</b>	<b>SECTION:</b>	<b>17</b>

**FORM C – CAPITAL OR NON-RECURRING APPROPRIATION REQUEST**

<b>DECISION PACKAGE</b>	<b>3083</b>
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*Provide the decision package number issued by the PBF system ("Governor's Request").*

<b>TITLE</b>	<b>Student Academic System Computer Software</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$2,000,000.00</b>
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*How much is requested for this project in FY 2015-16?*

<b>BUDGET PROGRAM</b>	<b>Education &amp; General – Capital/Non-recurring</b>
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*Identify the associated budget program(s) by name and budget section.*

<b>SUMMARY</b>	<p>To meet more effectively the needs of our students and their parents, faculty, and other constituencies, Francis Marion University plans a major upgrade in its student academic system computer software. The current legacy system used by FMU is now more than forty years old and its useful life is at an end. This "home-grown" system originated in the 1970s and has been enhanced incrementally since its inception. However, after more than four decades of service—a very long time indeed in terms of computer software—the legacy system has become obsolete. Among other considerations, there is a steadily dwindling number of information technology staff able to support the legacy system. Accordingly, that system can no longer provide the data and resource management information needed to guide University operations. In order to improve services for students and their parents, for faculty, administrators, and other internal and external constituencies, Francis Marion is seeking funding for a new comprehensive computer software package that will enhance the efficiency and effectiveness of vital university operations, including course scheduling, student course enrollment, workload assessment, institutional research, and data collection and analysis for management functions and for required reporting to grant-awarding and accreditation entities. Given the age and obsolescence of the existing computer software system, the need for new a computer software system is clear and unambiguous.</p> <p>Francis Marion has conducted a thorough review of student academic system computer software packages. This review has allowed the University to identify various cutting-edge computer software systems that will meet the present needs of a regional university while providing the capability to expand and adapt to future needs. The University's research indicates that a non-recurring appropriation of \$2,000,000 is required to purchase an adequate, comprehensive student academic system software package.</p> <p>A new student academic system will bring numerous and important benefits for our students, their parents, and various other groups. For instance, improved course scheduling and student enrollment capability will help ensure more efficient placement of students into classes. Faculty advisement will become more effective and thus graduation rates are expected to improve. Workload assessment will become more</p>
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<b>AGENCY NAME:</b>	<b>Francis Marion University</b>		
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readily available and will result in the more efficient utilization of part-time and full-time faculty. Evaluation of progress toward degree completion will become much easier for students, faculty advisers, and the Office of the Registrar. Access to data used to guide administrators in efficient resource allocation will improve significantly. Institutional research and reporting, especially to external entities and to support grant applications, will also improve. The investment in new student academic system computer software will enhance operations in virtually every area of the University.

At a time when public universities are asked to do more for their students and for the state of South Carolina, an upgraded student academic system has become essential. Thus Francis Marion respectfully requests a non-recurring appropriation of \$2,000,000 in order to acquire a new student academic system computer software package that will serve the University and the state for many decades to come.

*Provide a summary of the project and explain why it is necessary. If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.*

**RELATED REQUEST(S)** 3089

*Is this decision package associated with other decision packages requested by your agency or other agencies this year? Is it associated with a specific capital or non-recurring request?*

**MATCHING FUNDS** Currently, the University has not allocated or identified any potential matching funds for this request.

*Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source and amount.*

**FUNDING ALTERNATIVES** Currently, there are no other funding sources identified.

*What other possible funding sources were considered?*

**LONG-TERM PLANNING AND SUSTAINABILITY** Currently, there have been no other funds invested into this project. The University is seeking recurring funding of the annual cost of the system by the related request noted above.

*What other funds have already been invested in this project (source/type, amount, timeframe)? Will other capital and/or operating funds for this project be requested in the future? If so, how much, and in which fiscal years? Has a source for those funds been identified/secured?*

**OTHER APPROVALS** At this time there are no approvals to be obtained to ensure that the project will succeed.

*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, BCB, etc.)*