

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
<b>AGENCY CODE:</b>	H630	<b>SECTION:</b>	1



**Fiscal Year 2018-19  
Agency Budget Plan**

**FORM A - BUDGET PLAN SUMMARY**

<b>OPERATING REQUESTS (FORM B1)</b>	<b>For FY 2018-19, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

<b>NON-RECURRING REQUESTS (FORM B2)</b>	<b>For FY 2018-19, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

<b>CAPITAL REQUESTS (FORM C)</b>	<b>For FY 2018-19, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting funding for Capital Projects.
	<input type="checkbox"/>	Not requesting any changes.

<b>PROVISOS (FORM D)</b>	<b>For FY 2018-19, 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.

	<i>Name</i>	<i>Phone</i>	<i>Email</i>
<b>PRIMARY CONTACT:</b>	John J. Warner	864 282 3738	johnwarner@scgsah.org
<b>SECONDARY CONTACT:</b>	Dr. Cedric L. Adderley	864 282 3785	cadderley@scgsah.org

I have reviewed and approved the enclosed FY 2018-19 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

<b>SIGN/DATE:</b>	<i>Cedric L. Adderley</i>	<i>Chad Prosser</i>
	<b>TYPE/PRINT NAME:</b> Dr. Cedric L. Adderley	Chad Prosser

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

Fiscal Year 2018-19 Budget Request Executive Summary

Agency Code: H630  
 Agency Name: SC Governor's School for the Arts and Humanities  
 Section:

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	C - Capital	SCGSAH Fire Protection Component Upgrade	480,000				480,000					0.00
2	B2 - Non-Recurring	SCGSAH Core Switch Replacement	65,000				65,000					0.00
3	B1 - Recurring	Director of Outreach and Engagement Position	87,100				87,100	1.00				1.00
4	B1 - Recurring	Production Manager II Position	62,980				62,980	1.00				1.00
5	C - Capital	SCGSAH Dining Hall Expansion and Furniture Replacement	280,000				280,000					0.00
6	B2 - Non-Recurring	SCGSAH Utility Vehicle Replacement	25,000				25,000					0.00
7	C - Capital	SCGSAH Elevator Upgrade	155,000				155,000					0.00
8	B1 - Recurring	Building and Grounds Specialist II Position	38,840				38,840	1.00				1.00
9	C - Capital	SCGSAH HVAC Split System Replacement	150,000				150,000					0.00
10	C - Capital	Repave SCGSAH Parking Lot and Roads	235,000				235,000					0.00
11	B2 - Non-Recurring	SCGSAH Drama Theater Lighting Upgrade	65,000				65,000					0.00
12							0					0.00
13							0					0.00
14							0					0.00
15							0					0.00
16							0					0.00
17							0					0.00
18							0					0.00
19							0					0.00
20							0					0.00
21							0					0.00
22							0					0.00
23							0					0.00
24							0					0.00
25							0					0.00
26							0					0.00
27							0					0.00
28							0					0.00
29							0					0.00
30							0					0.00
TOTAL BUDGET REQUESTS			1,643,920	0	0	0	1,643,920	3.00	0.00	0.00	0.00	3.00

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
<b>AGENCY CODE:</b>	H630	<b>SECTION:</b>	1

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>3 – Form #13226</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Director of Outreach and Engagement Position</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$87,100 (\$65,000 classified salary, \$22,100 fringe)</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$87,100</b>
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*What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>One classified FTE position</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
<b>AGENCY CODE:</b>	<b>H630</b>	<b>SECTION:</b>	<b>1</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>2.3 Enhance outreach efforts throughout the state; 2.3.1 Organize outreach performances in other areas of the state; 2.3.2 Provide support for presentations and workshops for teachers and students; 2.3.3 Continue to develop campus outreach offerings for teachers and students</p>
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>RECIPIENTS OF FUNDS</b>	<p>Director of Outreach and Engagement, full-time SCGSAH staff, salary and benefits</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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>Over the course of the last five years, Outreach has become a more significant component of the day-to-day operations of the Governor's School for the Arts and Humanities. It has grown from a part-time effort reaching a fraction of the population into a full-time initiative reaching 26 counties and nearly 22,000 participants during the last academic year. A new supervisory position is requested to oversee the continued focus on current needs of the existing partners throughout the state as well as growth in programming, collaborative instructional partnerships with schools, and both short- and long-term engagement opportunities that fulfill the Governor's School mission. This position will allow for the Outreach services to realize our full potential of serving additional counties in South Carolina and strengthen the networks for strategic growth in all components of the Outreach unit.</p>
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.*

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
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**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>4 – Form #13227</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Production Manager II Position</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$62,980 (\$47,000 classified salary, \$15,980 fringe)</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$62,980</b>
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*What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>One classified FTE position</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input type="checkbox"/>	Government and Citizens

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
<b>AGENCY CODE:</b>	<b>H630</b>	<b>SECTION:</b>	<b>1</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>1.1 Validate that curricula remain aligned with current trends and expectations for post-secondary education and training; 1.1.4 Develop new curricular and programming options to meet student needs. This request will provide adequate production capabilities for our dance, drama and music departments.</p>
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>RECIPIENTS OF FUNDS</b>	<p>SCGSAH Production Manager salary and benefits</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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The SCGSAH maintains an active performance calendar that necessitates the involvement of a production manager that can accommodate a range of needs across all departments. The production manager is expected to contribute directly to production by providing specialized skills in set design and construction, as well as hiring and managing temporary personnel to handle other specialized production needs. The production manager is also responsible for overseeing the recording and editing needs for music and dance departments, as well as audio and visual needs for the various events on campus that occur throughout the year. With the introduction of livestreaming, these needs have increased over the last year and will continue to grow. Additionally, upgrades to the Fluor Dance Studio have allowed us to expand performance opportunities on campus for the dance department, which requires additional production expertise to design and implement lighting and staging for these events. Currently, the school functions with one full-time employee in a Production Manager I position. SCGSAH operated with two full-time production personnel until budget cuts in 2008 forced the school to cut back in this area. We have attempted to meet production needs by hiring temporary personnel, but it is very difficult to find personnel with sufficient production expertise, especially as our needs have continued to grow. By adding a Production Manager II position, the school will be able to take a more comprehensive approach to meet production needs.</p>
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.*

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
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**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>8 – Form #13231</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Building and Grounds Specialist II Position</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$38,840 (\$30,000 salary and \$8,840 fringe)</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$38,840</b>
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*What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>One classified FTE position</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input type="checkbox"/>	Government and Citizens

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
<b>AGENCY CODE:</b>	<b>H630</b>	<b>SECTION:</b>	<b>1</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>3.1 Update facilities to improve accessibility to campus and meet curricular needs.</p>
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>RECIPIENTS OF FUNDS</b>	<p>Building and Grounds Specialist salary and fringe benefits</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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>During FY 2008-2009 and FY 2009-2010, due to budget reductions, SCGSAH reduced facilities staff. In recent years, the school has used temporary positions to maintain the buildings and grounds. A new administrative building was completed in FY 2015, and the new music building will be completed in FY 2019. The building and grounds maintenance requirements will exceed that of our current full-time and temporary staff. We request funding and position for additional building and grounds specialist.</p>
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.*

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
<b>AGENCY CODE:</b>	H630	<b>SECTION:</b>	1

**FORM B2 – NON-RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>2 – Form #13225</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH Core Switch Replacement</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$65,000</b>
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*What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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
	<input checked="" type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
	<input checked="" type="checkbox"/>	Request for Non-Recurring Appropriations
<input type="checkbox"/>	Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/>	Related to a Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<input checked="" type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

<b>ACCOUNTABILITY OF FUNDS</b>	3.2 Implement long range maintenance/replacement plan for equipment and technology.
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
<b>AGENCY CODE:</b>	<b>H630</b>	<b>SECTION:</b>	<b>1</b>

<b>RECIPIENTS OF FUNDS</b>	SCGSAH to purchase an IT core switch
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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>JUSTIFICATION OF REQUEST</b>	<p>The Cisco WS-C6509-E Core Switch on campus is at EOL (End of Life). At this time, replacement components are no longer being sold, and the device itself is becoming overloaded with the increased traffic on our network (wireless access points, changeover from analog cameras to IP cameras, increased number of devices, etc.). In the event that the Core Switch goes offline, the entire network would be unusable. The school is able to maintain Cisco SmartNET support until November, 2017. The school will not be capable of renewing in 2018.</p> <p>This request was included in the FY 2018 budget bill, in Proviso 118.14, which was a prioritized list of appropriations, dependent primarily on availability of unobligated general fund revenue from FY 2016-2017. There was insufficient funds available to fund this project, and the core switch will not be replaced in FY 2018.</p> <p>Purchase of a new core switch in FY 2019 will cost \$65,000</p>
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?*

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
<b>AGENCY CODE:</b>	H630	<b>SECTION:</b>	1

**FORM B2 – NON-RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>6 – Form #13229</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH Utility Vehicle Replacement</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$25,000</b>
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*What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
<input type="checkbox"/> Related to a Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	

<b>ACCOUNTABILITY OF FUNDS</b>	3.1 Implement long-range maintenance/replacement plan for equipment and technology.
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
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<b>RECIPIENTS OF FUNDS</b>	SCGSAH for the purchase of a new pick-up truck.
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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>JUSTIFICATION OF REQUEST</b>	In 2000, SCGSAH purchased a pick-up truck and a new cargo van to be used for grounds and facilities maintenance. The pick-up truck is now 17 years old and have multiple mechanical issues. This request is to replace with a Ford F250 long bed truck (\$25,000). The truck is for grounds, maintenance and moving equipment for various areas.
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?*

<b>AGENCY NAME:</b>	SC Governor's School for the Arts and Humanities		
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**FORM B2 – NON-RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>11 – Form #13234</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>SCGSAH Drama Theater Lighting</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>\$65,000</b> <i>What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
<input type="checkbox"/> Related to a Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<input checked="" type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	

<b>ACCOUNTABILITY OF FUNDS</b>	3.1 Update facilities to improve accessibility and meet curricular needs 3.2 Implement long-range maintenance/replacement plan for equipment and technology
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*What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?*

<b>AGENCY NAME:</b>	<b>SC Governor's School for the Arts and Humanities</b>		
<b>AGENCY CODE:</b>	<b>H630</b>	<b>SECTION:</b>	<b>1</b>

<b>RECIPIENTS OF FUNDS</b>	SCGSAH to purchase theater lighting for the Drama Department theater
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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>JUSTIFICATION OF REQUEST</b>	<p>SCGSAH Drama theater (Sakas) lighting system is outdated. Most of our lighting system is still from the original building of the school. SCGSAH current lighting equipment is incapable of producing the effects required by today's theatrical productions. Our strip lighting fixtures fail often, and cannot be kept in operation for the run of a show. Many of the lights require extraordinary effort for troubleshooting/rewiring and rotating replacement bulbs due to shorts. Our general lighting system in Sakas currently has no LED color changing fixtures. The lack of color control is very limiting for lighting designers and ultimately can affect the success of the director's vision for the show.</p> <p>The requests funding is for updated par LED lighting. LED fixtures would replace all conventional 575watt pars that are used every day for all classes that happen in Sakas. These LED fixtures also produce far less heat, which would lower HVAC expenses. Having LED fixtures would also eliminate the need for disposable items such as replacement bulbs (\$25ea) and colored gel (about \$300 per show). LED fixtures allow for on the spot color mixing, this gives our designers many more options than a typical lighting gel, each fixture can change colors throughout the show instead of needing to pick one color for the entire show.</p>
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*Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?*

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**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>1 – Form #13224</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH Fire Protection Component Upgrade</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$480,000</b>
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*How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	<p>This project was not included in the CPIP. When SCGSAH replaced two fire alarm panels in late July 2017, the school was informed that the components of the fire protection system would need to be also upgraded to meet code. The CPIP was submitted in early July. Contingency plan is to request a waiver until funding is available.</p>
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*Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.*

<b>OTHER APPROVALS</b>	<p>The replacement components will be reviewed by the State Engineer office.</p>
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*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	<p>Two of the school's fire alarm panels were replaced in late July 2017 at a cost of \$38,000. At that time the local fire marshal informed the school that other components of the fire protection system would need to be upgraded to meet code. No further funds will be requested for this project. No additional operating costs are anticipated.</p>
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*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? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds*

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*will be impacted by those costs or savings? What is the expected useful life of the capital improvement?*

**SUMMARY**

The Governor’s School campus consists of 8 buildings. The SCGSAH fire alarm system consists of two main fire panels that are integrated with one another. We have approximately 800 other fire devices – horns, strobes, smoke and heat detectors, etc. The original fire panels and system were manufactured by Secutron. Approximately five years ago, Secutron was acquired by another company, Mircom. The fire panels we had in place were no longer manufactured. Replacement parts became unavailable in 2014, and we were no longer able to buy replacement parts to repair problems within the system.

In the Summer of 2017, we replaced our fire panels with two new Mircom panels. The new panels meet current fire and safety codes and are compatible for bringing our entire fire system up to code. As this work was completed, we were directed by the local fire marshal and state engineer office that we would now need to bring our complete fire system up to code as soon as possible. This includes adding a voice evacuation system. It involves replacing all horns, strobes, audio network controllers, smoke detectors, heat detectors, pull stations and relay modules. It also involves completely re-wiring all devices to meet code. In August, we hired a fire system vendor (Gen X) to examine our system and provide a financial framework for the cost to upgrade our system to bring it up to code. They provided an estimated budget for completing the project of \$460,000. This includes \$340,000 to upgrade the system to voice evacuation and \$120,000 to replace all current devices. Additional wiring is estimated at \$20,000 issues. The total funding required to bring the system up to code is \$480,000.

*Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.*

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**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>5 – Form #13228</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH Dining Hall Expansion and Furniture Replacement</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$280,000</b>
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*How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	<p>This project was not included in the 2018-2022 CPIP. At the time of preparation of the CPIP, these were expected to be two independent projects. With the food service vendor's donation of \$210,000, and the delay of the dining hall expansion due to other construction, SCGSAH recently decided to combine the two projects into one capital project. If funding is not available, SCGSAH will delay the project.</p>
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*Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.*

<b>OTHER APPROVALS</b>	<p>State Engineer's office will approve the plans and assist in the expansion.</p>
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*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	<p>No other funds have been expended on this project. Since this project is upgrading existing space, with some expansion, operating cost increases are anticipated to be immaterial.</p>
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*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? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds*

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*will be impacted by those costs or savings? What is the expected useful life of the capital improvement?*

<b>SUMMARY</b>	<p>SCGSAH dining hall currently accommodates about 120 people. Usual school student population of about 240, plus staff that dines on campus far exceeds the dining hall capacity. The dining area is outdated and institutional, the furniture is the original furnishings that will be 20 years old in FY 2019. The dining hall should be expanded and the furniture needs to be replaced.</p> <p>In 2016, SCGSAH engaged an architect to provide schematic plans for a dining hall expansion. The same year, SCGSAH food service provider, Aramark, donated \$210,000 toward the expansion of the dining hall. Preliminary drawings and design have been produced by the architect. The architect's estimate for the dining hall expansion is \$330,000 and for the furniture is \$160,000. Subtracting the \$210,000 donation from Aramark, leaves \$280,000 to be requested from state appropriations.</p>
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**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>7 – Form #13230</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH Elevator Upgrade</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$155,000</b>
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*How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	<p>This project was not included in the 2018-2022 CPIP. When the CPIP was prepared, we expected the cost of this project to be under \$100,000, and therefore did include it in the CPIP. We have since obtained verified costs of about \$155,000. If funding is not available, SCGSAH will ask for a waiver to code and delay the request to FY 2020.</p>
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*Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.*

<b>OTHER APPROVALS</b>	<p>Department of Labor will need to inspect the elevators after the upgrade.</p>
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*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	<p>No other funds have been expended on this project. Since this project is upgrading existing equipment, no operating cost increases are anticipated.</p>
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*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? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital*

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*improvement?*

**SUMMARY**

There are four hydraulic elevators operating at SCGSAH. According to industry standards, the life of a hydraulic elevator is approximately 15 to 20 years. Our elevators will reach the 20 year threshold at the end of FY 2018. Two of the four elevators are located in academic areas and are used every day but the overall usage would be considered moderate. These elevators both maintain three levels (basement, 1<sup>st</sup> and 2<sup>nd</sup> floors). The motors for these two elevators are located in different elevator closets. They are maintained regularly. Both of these elevators have had an increase in service needed over the past two years with some disruption of service but no significant break downs and only a few entrapments. The other two elevators are located on the respective halls of the residence hall. These elevators have high usage and both maintain five levels (basement, 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> floors). The motors for both of these elevators are located in one small elevator room with no ventilation or air conditioning. Both of these elevators have had to be serviced numerous times in the past two years with multiple periods where service was disrupted. These elevators both have extremely high use during move-in and out times and generally both overheat and shut down at some point during each day of high use. We have had at least ten entrapments in the last year when an elevator would break down during usage.

SCGSAH wishes to start with upgrading the two elevators in the residence hall. The most important elements of the upgrade are replacement of the three main components: the controller, the door operator and the pump/motor. Once these components are replaced, the elevator must immediately be brought up to code for compliance with ASME, ANSI A17.1 and CSA B44 Elevator Code and all ADA requirements. Additional components to meet code requirements include: a soft starter, valve, new inspection operation panel, door protection device, automatic self-leveling system, hoist way operating device, new hands free emergency phone device, pit switch, applied car operating panel, in-car lantern and emergency lighting. Otis Elevator has quoted a price for the modernization of these two elevators. The total price, today, to upgrade two residence hall elevators is \$151,000. Adding some contingency for cost increases to FY 2019, we request \$155,000.

*Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.*

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**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>9 – Form #13232</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>SCGSAH HVAC Split System Replacement</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$150,000</b>
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*How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	2018-2022 CPIP plan year 1 (2018-2019) and priority number one of that plan year. If state funding is not available, SCGSAH will attempt to repair these systems as need and delay the funding request to FY 2020.
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*Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.*

<b>OTHER APPROVALS</b>	None required. This is a replacement of existing systems.
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*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	No other funds have been expended in this project. Since this project is replacement of existing HVAC split systems, no additional operating funds are necessary. No additional capital funds will be requested for this project.
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*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? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital improvement?*

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<b>SUMMARY</b>	<p>These original SCGSAH HVAC split systems will be 20 years old in FY 2019. These six systems heat and cool classrooms and offices. The systems will be at the end of their useful life in FY 2019 and should be replaced.</p> <p>Our HVAC service provider, Trane, estimates the cost of replacement of these six systems to be \$150,000.</p>
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*Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.*

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**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>10 – Form #13233</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Repave SCGSAH Parking Lot and Roads</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$235,000</b>
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*How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	2018-2022 CPIP plan year 1 (2018-2019) and priority number three of that plan year. If state funding is not available, SCGSAH will continue to repair the pavements and delay the funding request to FY 2020.
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*Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.*

<b>OTHER APPROVALS</b>	None required
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*What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	No other funds have been invested in this project. No additional operating costs will be incurred.
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*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? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital improvement?*

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<b>SUMMARY</b>	<p>SCGSAH parking lot and roads will be 21 years old in FY 2019. These are the original surfaces and are in need of repaving. A sidewalk would be added adjacent to the parking lot for safety of students leaving campus. Costs are calculated at \$5.00 per square foot for approximately 40,000 square feet of paved surface plus \$35,000 for the adjacent sidewalk. Total \$235,000.</p>
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*Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.*

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**FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION  
CONTINGENCY PLAN**

<b>TITLE</b>	Agency Cost Savings and General Fund Reduction Contingency Plan
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<b>AMOUNT</b>	<p><b>\$245,992 (3% of \$8,199,722)</b></p> <p><i>What is the General Fund 3% reduction amount (minimum based on the FY 2017-18 recurring appropriations)? This amount should correspond to the reduction spreadsheet prepared by EBO.</i></p>
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<b>ASSOCIATED FTE REDUCTIONS</b>	<p>Two FTE's with salary and fringe totaling approximately \$147,000</p> <p><i>How many FTEs would be reduced in association with this General Fund reduction?</i></p>
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<b>PROGRAM/ACTIVITY IMPACT</b>	<p>Some classroom and office furniture, classroom equipment and common area furniture replacements would be delayed. Lighting upgrades planned for residence hall rooms would also be delayed until funds are available. Other projects could also be delayed or cancelled.</p> <p><i>What programs or activities are supported by the General Funds identified?</i></p>
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<b>SUMMARY</b>	<p>Two FTE staff reductions would reduce maintenance and service and administrative capacity. Some functions would see a reduction in service levels of maintenance and cleaning services. Administrative functions would be spread among other employees.</p> <p>Delaying projects such as replacement of furniture and equipment would require use of outdated and worn furniture and equipment until funds are available.</p>
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*Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.*

<b>AGENCY COST SAVINGS PLANS</b>	<p>SCGSAH will continue to monitor energy and utilities costs. Faculty, staff and students will be made aware of energy and water expenses and provided instruction in utilities savings.</p>
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*What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?*

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**FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS**

<b>TITLE</b>	None to submit
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*Provide a brief, descriptive title for this request.*

<b>EXPECTED SAVINGS TO BUSINESSES AND CITIZENS</b>	None
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*What is the expected savings to South Carolina's businesses and citizens that is generated by this proposal? The savings could be related to time or money.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<p><b>Mark "X" for all that apply:</b></p> <input type="checkbox"/> Repeal or revision of regulations. <input type="checkbox"/> Reduction of agency fees or fines to businesses or citizens. <input type="checkbox"/> Greater efficiency in agency services or reduction in compliance burden. <input type="checkbox"/> Other
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<b>METHOD OF CALCULATION</b>	
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*Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.*

<b>REDUCTION OF FEES OR FINES</b>	SCGSAH charges minimal fines and fees. Students' tuition and housing are provided by the state. Students pay for food service.
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*Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?*

<b>REDUCTION OF REGULATION</b>	SGCSAH promulgates no regulations
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*Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?*

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**SUMMARY**

SCGSAH has no opportunity for reducing cost and burden to business or citizens.

*Provide an explanation of the proposal and its positive results on businesses or citizens.  
How will the request affect agency operations?*