### Contact Information

1. Coyote ID *
   - This is the official California State University, San Bernardino identification number

2. First Name *

3. Last Name *

4. Phone Number *
   - Enter a 10-digit phone number (123) 456-7890 or (123) 456-7890 or 123-456-7890

5. CSUSB Email *
   - (Example: coyotej@coyote.csusb.edu or jcoyote@csusb.edu)
6. Select from the following: *
   - Campus Division
   - Palm Desert Campus (PDC)
   - Student Organization

7. Division *
   - Academic Affairs
   - Administration and Finance
   - Information Technology Services
   - Student Affairs
   - University Advancement

Academic Affairs - Departments
Please provide college departmental affiliation or specific office in your Project Abstract.

8. College/Department *

<table>
<thead>
<tr>
<th>Administrative Services</th>
<th>Academic Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Research, Office of</td>
<td>Academic Research, Office of</td>
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<td>Academic Resources</td>
<td>Academic Resources</td>
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<td>Academic Scheduling</td>
<td>Academic Scheduling</td>
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<tr>
<td>Center for International Studies and Programs</td>
<td>Center for International Studies and Programs</td>
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<tr>
<td>College of Arts and Letters</td>
<td>College of Arts and Letters</td>
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<tr>
<td>Jack H. Brown College of Business and Public Administration</td>
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<tr>
<td>College of Education</td>
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<td>College of Extended Learning</td>
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<td>College of Natural Sciences</td>
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<tr>
<td>College of Social Behavioral Sciences</td>
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<tr>
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<td>Faculty Affairs and Development</td>
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<tr>
<td>Graduate Studies</td>
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<tr>
<td>Institutional Research</td>
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<td>John M. Pfau Library</td>
<td>John M. Pfau Library</td>
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<tr>
<td>Research and Sponsored Programs</td>
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<tr>
<td>Undergraduate Studies</td>
<td>Undergraduate Studies</td>
</tr>
<tr>
<td>Teaching Resource Center</td>
<td>Teaching Resource Center</td>
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</tbody>
</table>

Administration and Finance - Departments
9. Administration and Finance *
Please provide college departmental affiliation or specific office in your Project Abstract.

- Accounting Services
- Accounts Payable
- Auxiliary Financial Services
- Budget Office
- Environmental Health & Safety
- Facilities Planning & Management
- Human Resources
- Parking & Transportation Services
- Payroll
- Printing Services
- Property Management
- Procurement and Contracts
- Receiving/Mail Services
- Risk Management
- Student Financial Services
- University Enterprises Corporation at CSUSB
- University Police

Information Technology Services - Departments

10. Information Technology Services *
Please provide college departmental affiliation or specific office in your Project Abstract.

- Academic Technologies & Innovation
- Administrative Computing & Business Intelligence
- Project Management & Assessment
- Information Security & Emerging Technologies
- Technology Operations & Customer Support
- Web & Mobile Services

Student Affairs - Departments
11. Student Affairs *
Please provide college departmental affiliation or specific office in your Project Abstract.

- Admissions and Student Recruitment
- Associated Students, Inc.
- Athletics
- Career Center
- Children's Center
- Counseling & Psychological Services
- Financial Aid
- Housing and Residential Life
- Judicial Affairs
- National Student Exchange
- Recreation and Wellness
- Registrar
- Services to Students with Disabilities
- SOAR
- Student Engagement
- Student Health Center
- Student Leadership & Development
- Student Union
- University Diversity Committee
- Veterans Success Center
- Workability IV
12. University Advancement *
Please provide college departmental affiliation or specific office in your Project Abstract.

Alumni Affairs
Campus News
Event Scheduling
Philanthropic Foundation
Office of Strategic Communication
University Development

13. Student Organization Name *

14. Proposal Category *
College specific proposals may address a specific discipline need or program. General proposals may focus on technology needs of the general student body.

- College
- General

FY 2020

15. Total Amount Requested for FY 2020 *

Project Abstract
16. Project Title *

17. Project Abstract (250 words or less)

18. Challenge(s) this project will address:

19. Alternate solution(s) should this project not be funded: *
20. If funded, please specify the name(s) of who will be responsible for managing the project from inception to completion? *

21. Please specify the name(s) of the area Information Technology Consultant and/or ITS staff member that was consulted in the preparation of this proposal: *

22. Impact(s) if this project is not funded: *

23. Cost: $$ (One time or recurring) *
24. What are your intended Process Outcomes and/or Student Learning Outcomes?

"Process Outcomes" describe the improvements you expect to see as a result of changes to existing offerings, approaches, or processes in your office operation. Examples of these types of outcomes include: increased student use of your services, increased student satisfaction with your services, reduced waiting time for appointments, increased attendance at your events, reduce error rates, etc.

"Student Learning Outcomes" describe the knowledge, skills, or behaviors that you intend for students to acquire as they interact with your program/office.

25. Assessment Plan and Key Performance Indicators (KPI)
(Measurable/Verifiable)

(Please note Measure(s) 1 below will provide evidence for Outcome 1 above and so forth)
26. In the spirit of transparency, we want to ensure students are aware of the various ways in which their Student Success Initiative fees are being used to support them at CSUSB. If awarded, how do you intend to publicize or make students aware of your project’s SSI funding source?

Project Timeline

27. Start Date (MM/DD/YYYY) *

28. End Date (MM/DD/YYYY) *

29. First Quarter of Student Use *
   (example: Spring 2017, Fall 2018)
30. Matching funds or resources allocated to project

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
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<tbody>
<tr>
<td>1</td>
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</tbody>
</table>

Project Collaboration

31. Statements of support by collaborating organization(s) or department(s) (if applicable)

Browse...

BUDGET DETAILS

32. Export here the Excel file that contains the Budget information for your project. *

Browse...

Print Copy
I hereby certify:

1. I understand that the project that I have proposed must be accessible to students with disabilities and comply with Section 508 and IT guidelines.
2. I will participate in mandatory training for electronic & information technology purchases and outcomes assessment reporting.
3. I have shared my proposal with my Dean/Vice President and received an affirmative to move forward with submitting it to the VETI Committee for consideration.

* Yes