VITAL_EXPANDING_TECHNOLOGIES_INITIATIVE- 2019 - 2020

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)

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

University Advancement - Departments
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

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Student Organization

13. Student Organization Name *

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Proposal Details

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

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FY 2020

15. Total Amount Requested for FY 2020 *

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Project Abstract
<table>
<thead>
<tr>
<th>16. Project Title *</th>
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<tbody>
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<table>
<thead>
<tr>
<th>17. Project Abstract (250 words or less)</th>
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<table>
<thead>
<tr>
<th>18. Challenge(s) this project will address:</th>
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<table>
<thead>
<tr>
<th>19. Alternate solution(s) should this project not be funded: *</th>
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</table>
20. Impact(s) if this project is not funded: *

21. Cost: $$ (One time or recurring) *

22. 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.
23. 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)

24. 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

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

26. End Date (MM/DD/YYYY) *
27. First Quarter of Student Use *
(example: Spring 2017, Fall 2018)

28. 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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<tr>
<td>5</td>
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</tr>
</tbody>
</table>

Project Collaboration

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

Browse...

BUDGET DETAILS

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

Browse...
31. California State University, San Bernardino

*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 discussed the content of my proposal with my area Information Technology Consultant and have considered his/her feedback in my project and timeline.
4. 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