LOS MEDANOS COLLEGE

Resource Allocation Process (RAP)
2014-15 Request Form

This form combines what was previously contained in three separate documents. It should be used to request resources for: new projects, programs, or services ("Program Improvement & Development"); maintaining existing programs or services ("Program Maintenance"); and new or increased classified positions ("Permanent Classified Staffing"). Below are the parameters for each category:

Program Improvement & Development
- Addresses proposals for – and requests for resources to support – **new projects that improve*, change or create programs or services*,** as opposed to projects that maintain existing programs or services
    - Examples include: new courses, new programs, or material changes to previously provided services (e.g. online counseling)
    - May include resources for: faculty personnel (hourly, re-assigned time, or stipend), student assistants, hourly classified, or classified positions *(see "Permanent Classified Staffing" section below for details)*
- Provides a mechanism for programs and/or departments to highlight the benefits of a project and to request resources to support it
- **Can only be made once a year** during the RAP process
- Project information will be forwarded to the Shared Governance Council (SGC) for review and recommendation

Program Maintenance
- Includes requests for resources needed to **maintain current programs and services** that support the department's achievement of its objectives and goals
    - Note: Replacement computers (instructional and administrative) should **NOT** be requested through this process, as a prioritization schedule is currently being developed for refreshing such technology.
- Provides a mechanism for programs and departments to identify needs that cannot be addressed through their currently allocated budget
- **Can be submitted throughout the year**, if/when a need arises
- Requests will be forwarded to the President's Cabinet for approval and allocation of funds

Permanent Classified Staffing
- Covers requests for additional resources needed to support the operations of either a new or an existing department/program. These requests are only for permanent classified personnel **(including previous reductions and layoffs).** *Permanent faculty and management/supervisory position requests are excluded from this process.* Requested positions MUST:
    - Consist of assigned responsibilities that fall within classified staffing parameters
    - Have an existing job description and be listed on the current salary schedule of the District
- **Can only be made once a year** during the RAP process
- Proposals will be forwarded to the Shared Governance Council (SGC) for review and recommendation

Please indicate which type of request you are submitting:

☐ **Program Improvement & Development** *[complete Sections A, B, C, D, E (if applicable) & F]*

    ☐ **Perkins** *[check this box and follow all required steps if the proposal is to be considered for this funding; Perkins IV process overview, eligibility criteria and application forms are available at www.losmedanos.edu/sg/ResourceAllocationProcessRAP.asp]*

☐ **Program Maintenance** *[complete Sections A, B, C, E (if applicable) & F]*

☐ **Permanent Classified Staffing** *[complete sections A, B, C, D, E & F]*

IMPORTANT INFO:
- **Use one form for each proposal/project**
- It is the responsibility of the requestor to ensure that the forms are complete and all necessary signatures are obtained prior to being submitted
- In order to be considered for 2014-15 funding, **RAP requests are due to the LMC Director of Business Services by 5:00 p.m. on Friday, February 21, 2014**

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SECTION A – REQUEST OVERVIEW

Project (Objective)/Request Title:

Department/Unit/Team:

Submitted by:
                       Name   *Extension*   *Date*

Total budget request =

If unit/team is submitting more than one proposal in this category, please indicate priority ranking of this request (1 = highest priority):

For Program Maintenance, specify type of request:
[check one]

          _____ Administrative/Instructional software

          _____ Media Equipment

          _____ Other Equipment

          _____ One-time Non-Equipment Purchase

          _____ Classroom/Student Services Furniture

          _____ Increase to Operating Funds

          _____ Facilities Modification

SECTION B – REVIEW/SIGNATURES

1st level review by Supervising Manager:
                                    Signature   *Date*

2nd level review by Area Manager:
                        Signature (Senior Dean/VP/President)   *Date*

For all staffing requests, the accuracy of salary and benefits figures must be confirmed with the LMC Business Office:
       Initialed by Director of Business Services

All technology-related requests (e.g. computers, software, A/V or media equipment, etc…) must be reviewed by the LMC IT Department to confirm costs and compatibility:
                                         Initialed by Technology Systems Manager

President's Cabinet:
(for Program Maintenance)   *Date reviewed*   *Funding source(s) identified*

SECTION C – PROJECT/POSITION OBJECTIVES

Provide a description of the project being proposed, including:
1) **clear details about the scope of the project, as documented in the "Objectives" section of your department/team Program Review and planning document; and**
2) **a listing of quantifiable (benchmarked) desired outcomes and defined project timelines.**

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SECTION D – PROJECT/POSITION RATIONALE

Explain how this project/position contributes to the achievement of College goals and/or positively impacts student success. Using the information documented in the "Activities" section of your Program Review and planning documents, include:
1) **details about how the project/position will support department goals and College strategic goals/directions;**
2) **any research data (qualitative/quantitative) or assessment results that support the need for this project/position; and**
3) **a listing of the type of program improvements/enhancements that will result from this project.**

If the request is submitted by Instructional/Student Services programs, identify how it will support enrollment growth, maintain enrollments, or reverse enrollment declines.

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SECTION E – STAFFING REQUEST

Proposed Position Title: _____

_____

Proposed Department/Program or Reporting Relationship: _____

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Indicate type of staffing being requested:

_____ New permanent classified position

_____ Increase to existing permanent classified position

_____ Hourly classified

_____ Faculty (hourly, reassigned time, or stipend)

_____ Student assistant(s)

Estimated FTE needed for position (e.g. number of hours per week, months per year, full-time/part-time, etc…):

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Provide a justification for the position request, including:
1) **historical staffing levels for the department/program (reference existing budgets for hourly or permanent staff, if applicable);**
2) **specific responsibilities to be assigned to this position (you do not have to indicate a specific job classification – this will be done as a Human Resources function after the proposal is approved);**
3) **how this position will address long-term staffing issues or operational problems.**

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SECTION F– BUDGET

Provide an explanation of the budgetary needs associated with this project/position, including how the funding will be used to support the project and yield a successful outcome:

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Indicate duration of funding request: _____ One year

_____ Two years

_____ Ongoing

_____ Other *(please specify_____)*

Provide a line item budget for the request (be sure to include each element in the narrative above):

CATEGORY	DESCRIPTION	AMOUNT
Supplies *[including taxes, S&H costs, etc…]*		
Equipment *[including taxes, S&H costs, etc…]*		
Software *[including taxes, S&H costs, etc…]*		
Inter-program charges *[e.g. copies, postage, etc…]*		
Travel		
Consultant/vendor fees		
Staffing *[include salary and benefits]*		
Classified – permanent (new or increase) *[calculate benefits at 21.2082% of salary]*		
Classified – hourly *[calculate benefits at 9.77% of salary]*		
Faculty – hourly *[calculate benefits at 7.57% of salary]*		
Faculty – re-assigned time or stipend *[contact LMC Business Office for details]*		
Student assistant(s) *[calculate benefits at 2.1%]*		
Other		
TOTAL BUDGET REQUEST		