

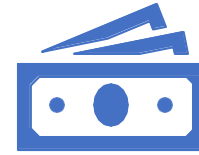
The logo for Cal Poly Pomona is a large, stylized arrow pointing to the right. It is composed of several overlapping triangular and quadrilateral shapes in shades of blue, green, and yellow. The arrow is positioned on the left side of the slide, pointing towards the event title.

CalPoly
Pomona

*Annual IRA Budget
Workshop and
Information Session*

Tuesday, February 7, 2023
Thursday, February 9, 2023

Presentation Outline



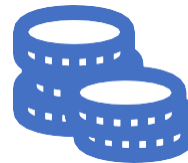
*1. Annual Budget
Process & Timeline*



*2. IRA Advisor
Appointment Form*



*3. IRA Budget
Request Forms*

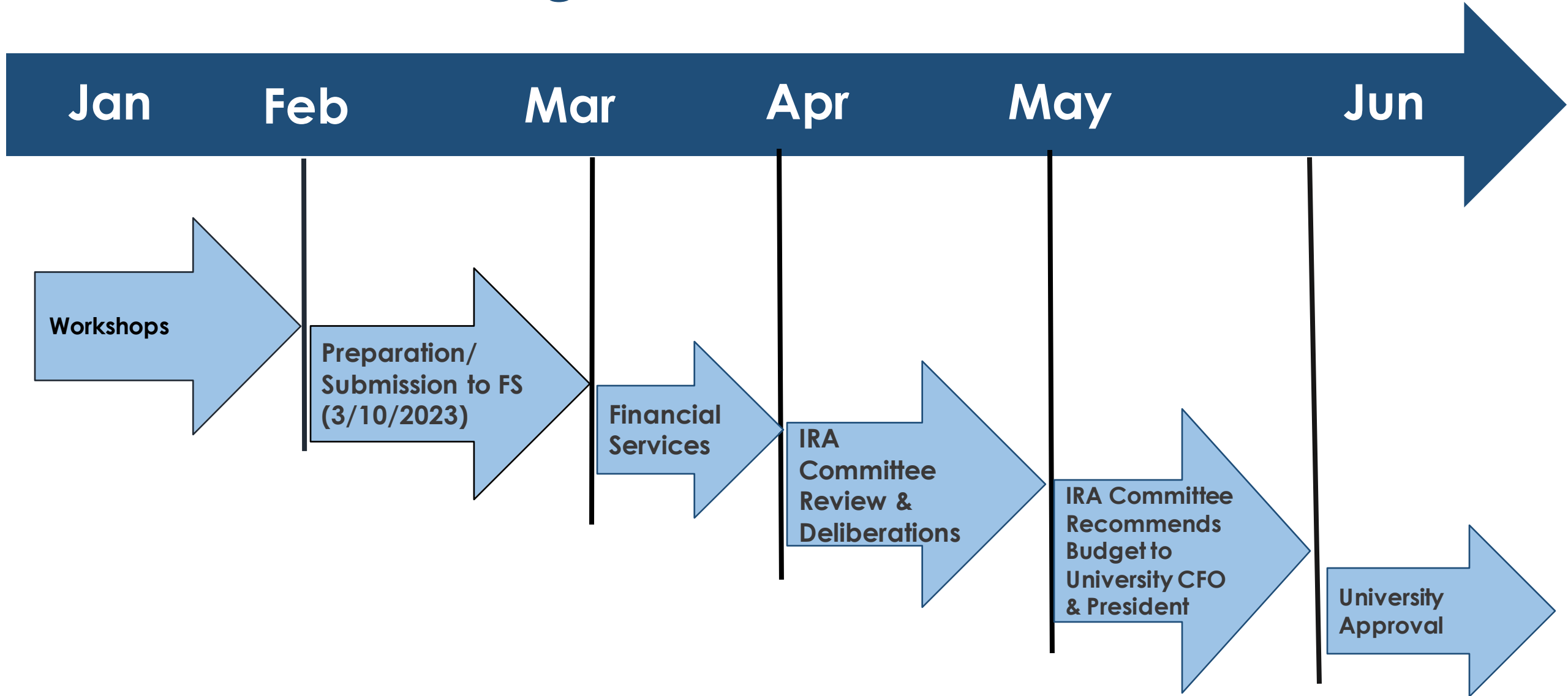


4. IRA Fee Revenue

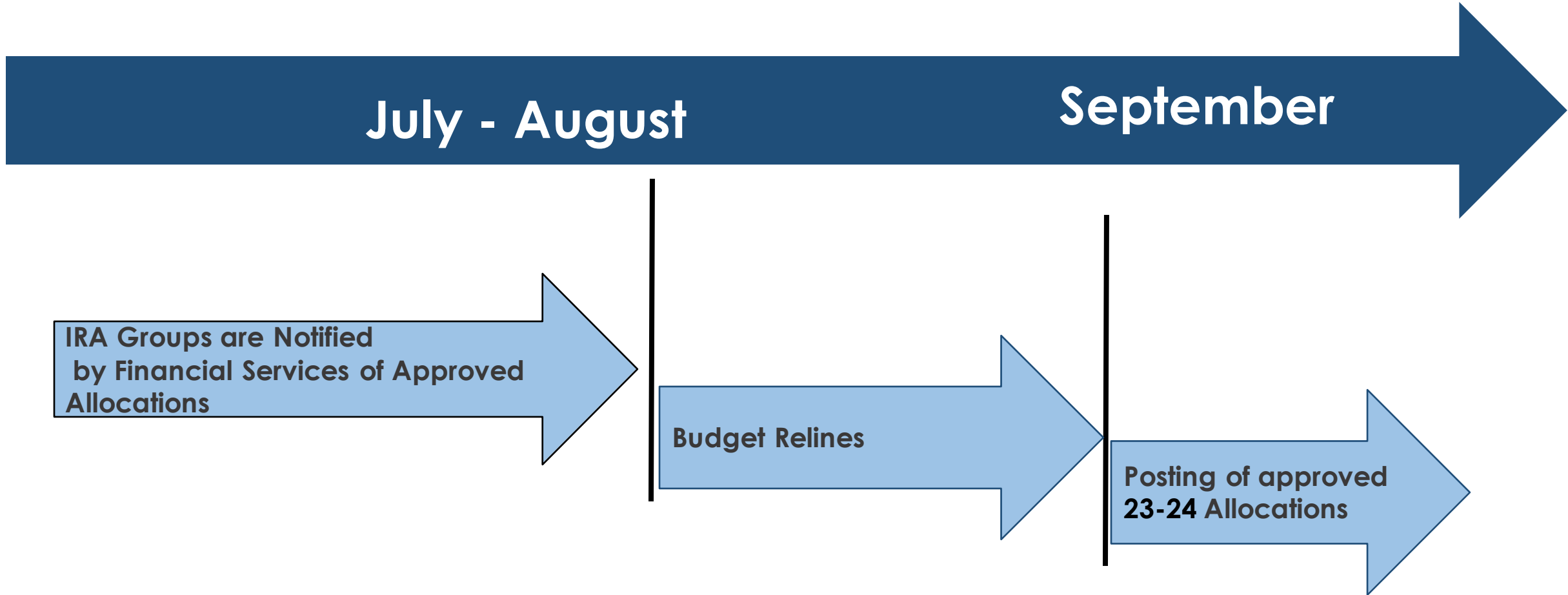


5. Questions

Budget Process & Timeline



Budget Process & Timeline (Cont.)



IRA Advisor Appt. Form



ADVISOR APPOINTMENT

Group Name

Fiscal Year

ORIGINAL SIGNATURES MUST BE OBTAINED

FIRST ADVISOR APPOINTMENT REQUEST

I am requesting appointment as faculty/staff advisor of the above IRA organization. I am familiar with and will carry out the responsibilities of organization faculty/staff advisor. I request approval by my Department Chair and/or immediate supervisor.

(Advisor Nominee – Print Name) (Advisor Nominee Signature) (Title) (Date)

(Department / College) (Office Bldg. – Room) (Office Ext)

(Email address)

SECOND ADVISOR APPOINTMENT REQUEST (Optional)

I am requesting appointment as faculty/staff advisor of the above IRA organization. I am familiar with and will carry out the responsibilities of organization faculty/staff advisor. I request approval by my Department Chair and/or immediate supervisor.

(Advisor Nominee – Print Name) (Advisor Nominee Signature) (Title) (Date)

(Department / College) (Office Bldg. – Room) (Office Ext)

(Email address)

DEAN, DEPARTMENT CHAIR / IMMEDIATE SUPERVISOR

I am in agreement with and give my approval for the above faculty/staff appointment. Both signatures are required.


(Department Chair or Head – Print Name) (Department Chair or Head – Signature) (Title) (Date)

(College Dean or Division Head – Print Name) (College Dean or Division Head – Signature) (Title) (Date)

• *Advisor Eligibility Requirements*

- Employee of the University. ASI employees are not eligible to serve as Advisors.
- Must identify a second advisor if they are on leave of absence during any part of the year.
- Approved by his/her immediate Supervisor or Department Chair.
- Approved by Dean and/or Division Head.

Request Form



**INSTRUCTIONALLY RELATED ACTIVITIES
CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
BUDGET REQUEST FORM**

IRA Budgeted Group _____
23-24
Budget Year _____

Annual Budget Request
 Reline Request
 Mid-Year Budget Request

Budget	Current Budget	FY 22-23 Budget	Difference	Academic Dept./ Org
INCOME				
1			-	Name _____
2			-	Academic Advisor _____
3			-	Name _____
4			-	Signature _____
TOTAL INCOME			-	Phone Number/E-mail Address _____
EXPENSES				
5			-	Date _____
6			-	Authorized Student Signer _____
7			-	Name _____
8			-	Signature _____
9			-	Phone Number/E-mail Address _____
10			-	Date _____
11			-	Authorized Student Signer (Optional) _____
12			-	Name _____
13			-	Signature _____
14			-	Phone Number/E-mail Address _____
15			-	Date _____
16			-	
17			-	
18			-	
19			-	
TOTAL EXPENSE			-	
BALANCE (Income-Expenses)			-	

Note: Unspent IRA Funding will be centralized & used for next year's allocation.


*If applicable please provide any supporting documents and justifications.

FOR OFFICE USE ONLY	
Financial Services Review/ Date _____	Committee Recommendation/ Date _____
	President Approved Amount/ Date _____

Line-Item Explanation

0						
Line Item Explanations 23-24						
				A =	B +	C
INCOME				FY 22-23 Budget	Non-IRA Budget (auto calc)	IRA Budget
Num	Description Detail / Explanation					
1						
2						
3						
4						
Total Income						
EXPENSES		Per Student Rate	Number of Students	FY 22-23 Budget	Non-IRA Budget (auto calc)	IRA Budget (enter #'s here)
Num	Description Detail / Explanation					
5						
6		\$0.00				
7		\$0.00				
8		\$0.00				
9		\$0.00				
10		\$0.00				
11		\$0.00				
12		\$0.00				
13		\$0.00				
14		\$0.00				
15		\$0.00				
16		\$0.00				
17		\$0.00				
18		\$0.00				
19		\$0.00				
Total Expense \$						
BALANCE (Income-Expenses)				\$	- \$	- \$

Budget Questionnaire



**Instructionally Related Activities
Budget Questionnaire
Fiscal Year 23-24**

Num	Questions / Request for Additional Info	Responses
	Name of Activity/Group:	
	Sponsoring Academic Department/Organization:	
1	Describe your instructionally related activity in detail to help the committee understand your budget request.	
2	Describe the learning outcomes for the students who participate in your instructionally related activity.	
3	How will you assess your instructionally related activity?	
4	Describe your assessment of the prior year's activities and the results.	
5	Describe the reasons for your budget and any changes from the final relined budget of the prior year?	
6	What other sources of income are you using to complement funds provided by the instructionally related activity student fee?	
7	What are your plans if you do not receive the full amount requested?	
8	What did we NOT ask you that you would like us to know?	

Budget Request Packet

Budget Request Form



INSTRUCTIONALLY RELATED ACTIVITIES
CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
BUDGET REQUEST FORM

IRA Budgeted Group
23-24

Budget Year

- Annual Budget Request
- Reline Request
- Mid-Year Budget Request

Budget	Current Budget	FY 22-23 Budget	Difference
INCOME			
1			-
2			-
3			-
4			-
TOTAL INCOME	-	-	-

EXPENSES			
5			-
6			-
7			-
8			-
9			-
10			-
11			-
12			-
13			-
14			-
15			-
16			-
17			-
18			-
19			-
TOTAL EXPENSE	-	-	-

BALANCE (Income-Expenses) - - -

Note: Unspent IRA Funding will be centralized & used for next year's allocation.

*If applicable please provide any supporting documents and justifications.

FOR OFFICE USE ONLY	
_____	Committee Recommendation/ Date
Financial Services Review/ Date	President Approved Amount/ Date

Academic Dept/ Org

Name

Academic Advisor

Name

Signature

Phone Number/E-mail Address

Date

Authorized Student Signer

Name

Signature

Phone Number/E-mail Address

Date

Authorized Student Signer (Optional)

Name

Signature

Phone Number/E-mail Address

Date

1. **IRA Budgeted Group:** your organization's name
2. **Budget Year:** FY 2023-24
3. **Type:** Annual Budget Request
4. **Signatures:** Financial Services is accepting electronic signatures/approval. There are three options on how to complete this process.
 - ✓ Printed Paperwork – manually sign, and scan or take a picture of paperwork. PDF and JPEG files are acceptable.
 - ✓ Adobe Sign using Acrobat – Use Adobe Acrobat to create your own personalized signature and electronically sign the document.
 - ✓ Type your name – Type your name in the signature field. Then email the document to Financial Services at asifs@cpp.edu. Keep reading! When you email the form, copy (cc) two authorized signers on your account. One student authorized signer (other than yourself) and an advisor. Both the authorized signer and advisor can reply to your email with “approved.” Financial Services will save the email as proof of approval.

Required

Sponsor Academic Department or Organization
Academic Advisor
Only one student signature is required

Budget Request Form (Cont.)



INSTRUCTIONALLY RELATED ACTIVITIES
CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
BUDGET REQUEST FORM

IRA Budgeted Group
23-24
Budget Year

- Annual Budget Request
- Reline Request
- Mid-Year Budget Request

Budget	Current Budget	FY 22-23 Budget	Difference
INCOME			
1			-
2			-
3			-
4			-
TOTAL INCOME	-	-	-

Budget	Current Budget	FY 22-23 Budget	Difference
EXPENSES			
5			-
6			-
7			-
8			-
9			-
10			-
11			-
12			-
13			-
14			-
15			-
16			-
17			-
18			-
19			-
TOTAL EXPENSE	-	-	-

BALANCE (Income-Expenses) - - -

Note: Unspent IRA Funding will be centralized & used for next year's allocation.

*If applicable please provide any supporting documents and justifications.

Academic Dept/ Org

Name

Academic Advisor

Name

Signature

Phone Number/E-mail Address

Date

Authorized Student Signer

Name

Signature

Phone Number/E-mail Address

Date

Authorized Student Signer (Optional)

Name

Signature

Phone Number/E-mail Address

Date

FOR OFFICE USE ONLY

Committee Recommendation/ Date

Financial Services Review/ Date

President Approved Amount/ Date

- **Current Budget**
 - Numbers from your most recent approved budget reline
- **FY 23-24 Budget**
 - Budget Request numbers for 23-24
- **Difference**
 - Auto calculates the differences between Current Budget and FY 23-24 Budget
- **For office use only**
 - Added: Committee Recommendation & President Approved Amount Lines

Line-Item Explanations

• Description Detail/Explanation

- Line-Item Description Auto populates from Budget Request Form
- Non-IRA Sources of Funds Full disclosure of all other funding sources (i.e., Foundation or state accounts)
- Make sure to include your calculations and assumptions for each line item. i.e. Conference \$ 5,500
 - Airfare \$250 X 10 Students = \$2,500
 - Lodging \$150 X 5 Rooms X 3 Nights = \$2,250
 - Meals \$25 X 3 days X 10 Students = \$750

• Per Student Rate / Number of Students (Expenses)

- Number of Students : Projected attendees
- Expense / number of students
i.e., Conference \$5,500 / 10 students = Rate \$550

• Column A - FY 23-24 Budget

- Auto Populates from Budget Request Form

• Column B - Non-IRA Budget Request

- Auto Calculates (A-C)

• Column - C- IRA Budget

- Income Section IRA Budget Allocation
- Expenses Section to spend IRA Allocation

0 Line Item Explanations 23-24						
INCOME				A =	B +	C
Num	Description Detail / Explanation			FY 22-23 Budget	Non-IRA Budget (auto calc)	IRA Budget
0				-	-	-
1				-	-	-
2				-	-	-
3				-	-	-
4				-	-	-
Total Income				-	-	-
EXPENSES		Per Student Rate	Number of Students	FY 22-23 Budget	Non-IRA Budget (auto calc)	IRA Budget (enter #'s here)
0		\$0.00		-	-	-
5		\$0.00		-	-	-
6		\$0.00		-	-	-
7		\$0.00		-	-	-
8		\$0.00		-	-	-
9		\$0.00		-	-	-
10		\$0.00		-	-	-
11		\$0.00		-	-	-
12		\$0.00		-	-	-
13		\$0.00		-	-	-
14		\$0.00		-	-	-
15		\$0.00		-	-	-
16		\$0.00		-	-	-
17		\$0.00		-	-	-
18		\$0.00		-	-	-
19		\$0.00		-	-	-
Total Expense				\$ -	\$ -	\$ -
BALANCE (Income-Expenses)				\$ -	\$ -	\$ -



**Instructionally Related Activities
Budget Questionnaire**

Fiscal Year 23-24

Num	Questions / Request for Additional Info	Responses
	Name of Activity/Group:	
	Sponsoring Academic Department/Organization:	
1	Describe your instructionally related activity in detail to help the committee understand your budget request.	
2	Describe the learning outcomes for the students who participate in your instructionally related activity.	
3	How will you assess your instructionally related activity?	
4	Describe your assessment of the prior year's activities and the results.	
5	Describe the reasons for your budget and any changes from the final relined budget of the prior year?	
6	What other sources of income are you using to complement funds provided by the instructionally related activity student fee?	
7	What are your plans if you do not receive the full amount requested?	
8	What did we NOT ask you that you would like us to know?	

Scoring Rubric

The committee uses the Rubric to evaluate and score budget proposals.

1. Activity has detailed plans that help the committee understand the budget items
 - 3 – There are detailed plans and the connections to the budget items are easy to understand
 - 2 – Plans are lacking detail OR the connections to the budget items are not easy to understand
 - 1 – Plans are lacking detail AND the connections to the budget items are not easy to understand
 - 0 – Details and connection to the budget items are absent or very difficult to understand
2. Planned activities are connected to specific student learning outcomes
 - 3 – Learning outcomes are well described and the connections between the learning outcomes and the planned activities are easy to understand
 - 2 – Learning outcomes are not well described OR the connections between the learning outcomes and the planned activities are not easy to understand
 - 1 – Learning outcomes are not well described AND the connections between the learning outcomes and the planned activities are not easy to understand
 - 0 – Learning outcome are absent or very difficult to understand
3. Activity has appropriate assessment plans for the coming year
 - 3 – A strong assessment plan is provided, including long-term outcomes and assessments beyond the direct performance of students in the activity (e.g. beyond exam scores or participation in event)
 - 2 – A reasonable assessment plan is provided, but the plan is mostly related to the direct performance of the students in the activity
 - 1 – Assessment plans are minimal OR assessment plans are not clear
 - 0 – Assessment plans are absent or very difficult to understand
4. Assessment has been completed on recent activities and demonstrates successful achievement of learning outcomes
 - 3 – Assessment has been completed with successful achievement of learning outcomes (OR The request is for the first year of this activity; it is not possible to have completed assessment)
 - 2 – Assessment efforts are underway
 - 1 – Questionnaire says learning outcomes are achieved but assessment method is not clear or the assessment period is not recent
 - 0 – Information about assessment results is absent or very difficult to understand
5. The reasons for changes from the Current Budget are clear
 - 3 – The reasons for each of the changes are clearly described (OR the budget requested matches the Current Budget)
 - 2 – The reasons for some of the changes are clearly described
 - 1 – Some changes are described but the description is not clear
 - 0 – Description of changes to the current budget is absent or very difficult to understand

6. IRA funding is complemented by other sources of income that are clearly described
 - 3 – Other sources of income are clearly described along with how they complement IRA funding
 - 2 – Other sources are not clearly described OR how they complement IRA funding is not clear
 - 1 – Other sources are not clearly described AND how they complement IRA funding is not clear (OR describes why no other sources of income are available/appropriate)
 - 0 – Information on other sources of income is absent or very difficult to understand
- F. Budget request gives clear explanations for each item and demonstrates careful efforts to obtain accurate pricing
 - The Budget Request Form:
 - 3 – Provides clear explanations and demonstrates careful efforts on pricing
 - 2 – Does not provide clear explanations OR does not demonstrate careful efforts on pricing
 - 1 – Does not provide clear explanations AND does not demonstrate careful efforts on pricing
 - 0 – Explanations about budget items are absent or very difficult to understand

IRA Fee Revenue



- *IRA fee per student does not change from year to year*

Factors that can that can affect your IRA budget allocation

1. *Projected enrollment*
2. *Possible addition of new IRA groups*
3. *Anticipated increases in funding request for existing groups*

IRA Funds

- IRA fund prohibits state-funded and state-sponsored travel to these states:

1. Alabama
2. Arizona
3. Arkansas
4. Florida
5. Georgia
6. Idaho
7. Indiana
8. Iowa
9. Kansas
10. Kentucky
11. Louisiana
12. Mississippi

13. Montana
14. North Carolina
15. North Dakota
16. Ohio
17. Oklahoma
18. South Carolina
19. South Dakota
20. Tennessee
21. Texas
22. Utah
23. West Virginia



Things to Remember

- *Budget Requests are due to Financial Services on March 10, 2023, by 5 pm*
- *Only requests submitted on the new forms will be accepted*
- *All Budget requests must be **typed, signed and fully completed***
- *No need to budget for carryover (unspent IRA Funding will be centralized & used for next year's allocation)*
- *Gray Shaded Cells = not required*
- *Green Shaded Cells = Automatic Populated/Calculated*
- *Blank Cells = write in required*

Contacts



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IRA Co-Chair

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[Microsoft Teams Video/Telephone Call](#)

Please use individual staff email addresses to connect



Questions

Budget Office Hours via Zoom

Tuesday	11 a.m. – Noon (Budget Questions) Zoom ID: 719 244 6104
Thursday	2 – 3 p.m. (Budget Questions) Zoom ID: 719 244 6104

Email: asifs@cpp.edu