# ­UCOP supplemental funding request (SFR)

# REVISIONS Form

Complete this form for changes of $100,000 or more above the original budget request. SFR process information is available on the [BFPA website](https://www.ucop.edu/ucop-budget/index.html). Forward completed form and accompanying documentation to your Division Chief of Staff for submission **in advance of the applicable deadline**. If your Division Lead or Chief of Staff is unfamiliar with this proposal, you are responsible for scheduling an appropriate briefing in advance with your Chief of Staff.

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| **APPROVED SFR ID#** | **Insert previous SFR ID# here** |
| **Date** | Enter current date. |
| **Fiscal Year** | Enter Starting fiscal year. |
| **Project Name** | Enter project name. |
| **Division COS** | Enter chief of staff’s name. |
| **Executive Sponsor** | Enter executive sponsor’s (division leader) name.  |
| **Project Lead** | Enter project lead’s name. |
| **Resources / Project Team Members** | Enter names of all key members of Project Team. Attach an organization chart showing project team members if more than 3, including existing and proposed FTEs or contractors. |

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| **Revision Request** |
| Describe why additional funds are needed and how project scope, timeline and/or budget will be affected. Include any new activities/steps. Provide any critical date by which a decision is required and describe associated risks. |

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| **Project Funds – One-time funds** |
| In this section, provide the one-time project cost totals listed in the original proposal, the SFR revision cost totals, and the cost differential between the two sets of figures over the five listed fiscal years. In “Explain Cost Differential” please account for all of the differences in cost between the “Original Approved SFR Total” and the “Revised Project Total.”  |
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| **Explain Cost Differential** | Explain new expenses to account for the cost differential. Address all new costs impacting UCOP and/or other UC system locations.  |
| **Requested Funding Source** |  Select primary funding source from dropdown. |
| **Requested Funding Source 2 (optional)** |  Select secondary funding source from dropdown. |
| **Funding Source Details** | Provide background on funding sources that you would draw upon for the revision to this MPI proposal, if applicable. Enter N/A if not applicable. |
| **Total Past Expenditures** | $Enter Whole Dollars |
| **Project Costs After Current Year + 4** | Elaborate on any annual costs beyond FY24-25 including $ amount, length of time, and rationale. Enter N/A if not applicable. |

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| **Ongoing Operational Expenditures Over Five Fiscal Years** |
| In this section, provide the ongoing operational cost totals listed in the original proposal, the SFR revision cost totals, and the cost differential between the two sets of figures. In “Explain Cost Differential” please account for all of the differences in cost between the “Original Approved SFR Total” and the “Revised Operational Total.” |
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| **Explain Cost Differential** | Explain any new ongoing expenses to account for the cost differential. Address all new costs impacting UCOP and/or other UC system locations. Enter N/A if not applicable.  |
| **Requested Funding Source** | Select primary funding source from dropdown. |
| **Requested Funding Source 2 (optional)**  | Select secondary funding source from dropdown. |
| **Funding Source Details** | Ongoing annual costs are not funded through the SPF. Explain how you plan to fund new ongoing annual costs resulting from this revision. Enter N/A if not applicable. |

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| **Total Project Expenditures** |
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| **Stakeholder Review** |
| List stakeholders who have reviewed this revision (e.g. ITS, UC Legal, Procurement, etc.). |

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| **Index of Supporting Documentation** |
| List all supporting documentation, including the original MPI, accompanying this revision to support the review process. |

Please do not complete the below sections during the submission process. These sections are reserved for ongoing information gathering between reviewers and project team, as needed.

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| **BFPA Team Review – Questions / Comments** |  |
| **Date** | **Questions from BFPA** | **Project Team Responses** |
| Enter date. | Enter BFPA’s questions / comments. | Enter Project Team responses. |

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| **Financial Stewardship Reporting Type**  |
| **Annual SPF Budget ≥ $500,000?** | Yes or No |
| **Presidential Initiative project?** | Yes or No |
| **Other risk or priority factor?** | Explanation |

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| **Submission Review Team – Questions / Comments** |  |
| **Date** | **Questions from Reviewers** | **Project Team Responses** |
| Enter date. | Enter Submission Review Team’s questions / comments. | Enter Project Team responses. |

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| **Submission Review Team – Recommendation** |
| Enter Submission Review Team’s recommendation. |

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| **Review Committee – Questions / Comments** |  |
| **Date** | **Questions from Reviewers** | **Project Team Responses** |
| Enter date. | Enter Review Committee’s questions / comments. | Enter Project Team responses. |

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| **Review Committee – Recommendation** |
| Enter Review Committee’s recommendation. |

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| **President’s Determination on SFR Proposal** |
| Summary Recommendation from Review Committee:Include proposal name, brief description, costs, funding source and division. |

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| ­\_\_\_\_ | Approved |
| \_\_\_\_ | Not Approved |
| \_\_\_\_ | Approved with the following modifications: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­ |
|  | Additional comments:­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­  |

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| Michael V. DrakePresident | Date |