**Form D: LOI Program Budget**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***One Time/ Start Up Costs*** | |  |  | |
|  | |  | **Annual Enrollment** | | | | | | | | |  |
|  | | ***Cost Categories*** | **Year 1** | | | **Year 2** | | **Year 3** | | **Year 4** | | **Year 5** |
|  | | Full Time Faculty  *(Salary & Fringe)* |  | | |  | |  | |  | |  |
|  | | Part Time/Adjunct Faculty  *(Salary & Fringe)* |  | | |  | |  | |  | |  |
|  | | Staff |  | | |  | |  | |  | |  |
|  | | General Administrative Costs |  | | |  | |  | |  | |  |
|  | | Instructional Materials, Library Acquisitions |  | | |  | |  | |  | |  |
|  | | Facilities/Space/Equipment |  | | |  | |  | |  | |  |
|  | | Field & Clinical Resources |  | | |  | |  | |  | |  |
|  | | Marketing |  | | |  | |  | |  | |  |
|  | | Other (Specify) |  | | |  | |  | |  | |  |
| ***One Time/Start-Up Support*** |  | | |  | | | ***Annual Income*** | | | | | |
|  | ***Revenue Sources*** | | | **Year 1** | | | **Year 2** | | **Year 3** | | **Year 4** | **Year 5** |  |
|  | Grants | | |  | | |  | |  | |  |  |  |
|  | Tuition | | |  | | |  | |  | |  |  |  |
|  | Fees | | |  | | |  | |  | |  |  |  |
|  | Departmental | | |  | | |  | |  | |  |  |  |
|  | Reallocated Funds | | |  | | |  | |  | |  |  |  |
|  | Other (specify) | | |  | | |  | |  | |  |  |  |
|  | **TOTALS** | | |  | | |  | |  | |  |  |  |