

**ILLINOIS STATE UNIVERSITY
GRADUATE PROGRAMS**

*Program Proposal Financial Implications Form
For Request for New Program Approval*

Purpose: Proposed new graduate programs (degrees, sequences, certificates) must include information concerning how the program will be financially supported to proceed through the curriculum proposal process. Signatures of the College Dean and Provost/Provost Representative are required prior to submission of the new program to the College Curriculum Committee.

Procedure: This completed form, with all necessary signatures, is to be attached to new program curricular proposals.

Definition: A "program" at the graduate level can be either a degree, a sequence as part of a degree, or a graduate-level certificate (Graduate Certificate, Post-Baccalaureate Certificate, or Post-Master's Certificate).

Complete the following information:

Department: Mathematics Date: February 20, 2006

Proposed New Program: MS Sequence in Biomathematics

Person Completing Form: Roger Eggleton Contact #: 438-8781

Complete Table I to show student enrollment projections for the program.

**Table I
STUDENT ENROLLMENT PROJECTIONS FOR THE NEW PROGRAM**

	1 st Year (July – June)	2 nd Year	3 rd Year	4 th Year	5 th Year
Number of Program Majors (Fall headcount)	3	5	5	6	6
Annual Full-Time-Equivalent Majors	3	5	5	6	6
Annual Credit Hours in EXISTING Courses ¹	30	30	30	30	30
Annual Credit Hours in NEW Courses ¹	2	2	2	2	2
Annual Number of degrees Awarded	0	0	3	2	5

¹Include credit hours generated by both majors and non-majors in courses offered by the academic unit directly responsible for the proposed program.

Complete Table II (even if no new funding is requested). Show all required resources including amounts and sources of funds reallocated from other programs or units.

Table II
PROJECTED RESOURCE REQUIREMENTS FOR THE NEW PROGRAM

	1 st Year (July - June)	2 nd Year	3 rd Year	4 th Year	5 th Year
FTE Staff ¹ (FTE)	0	0	0	0	0
Personnel Services (\$)	0	0	0	0	0
Equipment and Instructional Needs (\$)	0	0	0	0	0
Library (\$)	0	0	0	0	0
Other Support Services ² (\$)	0	0	0	0	0

¹Reflects the number of FTE staff to be supported with requested funds. Not a dollar entry.

²Other dollars directly assigned to the program. Do not include allocated support services.

Budget narrative listing projected sources of program funding (including sources of reallocated funds).

need *S.K.T.*
We do not ~~any funding needed~~ for this MS sequence.

Routing and action summary:

1. _____
Department/School Curriculum Committee Chair Date Approved
2. _____
Department Chairperson/School Director Date Approved
3. _____
College Dean Date Approved
4. _____
Provost/Provost Representative Date Approved
5. _____
Teacher Education Council Chairperson Date Approved
6. _____
College Curriculum Committee Chairperson Date Approved
7. _____
Graduate School Date Approved