Tennessee Higher Education Commission Appendix A: THEC Financial Projections Form Please Enter the Name of the Institution Here Please Enter the Name of the Proposed Academic Program Here

Seven-year projections are required for doctoral programs.

Five-year projections are required for baccalaureate and Master's degree programs

Three-year projections are required for associate degrees and undergraduate certificates.

 ${\it Projections should include cost of living increases per year.}$

Planning year projections are not required but should be included when appropriate.

	Planning Year	Year	· 1	,	Year 2	١	ear 3	Y	ear 4	Y	ear 5		Year 6	Ye	ar 7
I. Expenditures															
-															
A. One-time Expenditures															
New/Renovated Space ¹	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Equipment	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Library	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Consultants	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Travel	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Other	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total One-time	\$ -	\$		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
B. Recurring Expenditures															
Personnel															
Administration															
Salary	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Benefits	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total Administration	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Faculty															
Salary	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Benefits	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total Faculty	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Support Staff															
Salary	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Benefits	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total Support Staff	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Graduate Assistants															
Salary	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Benefits	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Tuition and Fees* (See Below)	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total Graduate Assistants	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Operating															
Travel	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Printing	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Equipment	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Other	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Sub-Total Operating	\$ -	\$		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Total Recurring	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL EXPENDITURES (A + B)	\$ -	\$		\$		\$		\$	-	\$	-	\$		\$	
IOIAL EXPENDITURES (A + B)	Ş -	Þ	-	Þ	-	P	-	Þ	-	P	-	P	-	P	-

*If tuition and fees for Graduate Assistants are included, please provide the following information.

 Base Tuition and Fees Rate
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II. Revenue

Tuition and Fees² Institutional Reallocations³ Federal Grants⁴ Private Grants or Gifts⁵ Other⁶

BALANCED BUDGET LINE

Planning Year		Year 1		Year 2		Year 3		Year 4			Year 5		Year 6		Year 7	
\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	
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Notes:

(1) Provide the funding source(s) for the new or renovated space.
(2) In what year is tuition and fee revenue expected to be generated? Tuition and fees include maintenance fees, out-of-state tuition, and any applicable earmarked fees for the program. Explain any differential fees.
(3) Identify the source(s) of the institutional reallocations, and grant matching requirements if applicable.
(4) Provide the source(s) of the Federal Grant including the granting department and CFDA(Catalog of Federal Domestic Assistance) number.
(5) Provide the name of the organization(s) or individual(s) providing grant(s) or gift(s).
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(6) Provide information regarding other sources of the funding.