



Operational Unit Program Review  
Continuous Quality Improvement Proposal (CQIP)  
**Resource:** \_\_\_\_\_

**Operational:**

Board Policy?    Yes    No      Administrative Procedure?    Yes    No

**Fiscal:**

One-time Funds       Ongoing Funding

**Issue:** *Briefly describe the issue.*

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**Vision/Mission/Institutional Master Plan Alignment:** *Address if this proposal is aligned with the College's vision, mission, and/or a strategic goal within the Institutional Master Plan. Usually these proposals have quoted a portion of one or more of areas being aligned with.*

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**Program Review Objective:** *Identify Program Review Objective/Effort if applicable.*

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**Background:** *Describe the background on this issue – where we are at the present time and how we got here.*

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**Rationale:** *Explain the reasoning behind the proposed improvements.*

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**Budgetary Impact:** *Detail any funding impact to the proposed improvements; sometimes this is a reduction in expenses, and sometimes there is increased spending needs to accomplish the improvements (e.g., a capacity issue within a programmatic area). However, sometimes the proposed improvement has no budgetary impact as it is a process or procedure improvement that does not have a financial component to it. Please explain and justify the extent of the impact(s) here.*

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**Resource Allocation Adjustments (if any):** *Like with fiscal impacts, process and procedure improvements can require changes in how resources on campus are allocated; it could be streamlining people's time, or tasks, or workflows, etc. Or the CQIP is addressing capacity issues for a programmatic area; in these circumstances there is likely both a budgetary impact AND resource allocation adjustment. These adjustments are detailed here.*

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**Recommendation:** *The recommendation is usually to implement the proposed improvement, and this gives a chance to briefly summarize the issue and its positive impact. In matters of budgetary increase requests this is a good place to reiterate and document the justification.*

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Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

Action Taken: \_\_\_\_\_