**Instructionally Related Activities (IRA)**

**APPLICATION SUMMARY OF PROGRAM ACTIVITIES**

|  |
| --- |
| PROGRAM TITLE: |
| SPONSORING UNIT:  |
| PROGRAM MANAGER(S):  |
|  |
| Briefly address each of the following criteria: |
|  |
| 1. Brief statement of program activities proposed:
 |
| 1. Number of students served and brief description of student populations served:
 |
| 1. Degree to which proposed activity is instructionally related. Must address, at least partially, instructionally related outcomes:
 |
| 1. Degree to which the proposed activity promotes and enhances student opportunity for involvement and/or exposure, while remaining accessible to the general student population:
 |
| 1. Mitigation of risk(s) to the university (if applicable):
 |
| 1. Leveraging dollars – any existing, and/or non-IRA matching funds that support the proposal:
 |
| 1. If proposal is requesting an *increase* in funds from previous awards must include a statement detailing the reasons for the increase:
 |
| 1. Any other information illustrating how these activities support the goals of IRA funding (if applicable):
 |

All IRA funding recipients from the previous and current academic year must submit a mandatory report containing a summary of the previous and current academic year’s expenditures and a short narrative of program activities explaining how objectives for the funding were met, with new proposals. If you have any questions regarding your expenditures, please contact Delfin Guillory, Student Financial Services manager at x3978 or DGuillory@csustan.edu.

**INSTRUCTIONALLY RELATED ACTIVITIES (IRA)**

**FUNDING USAGE & BUDGET REQUEST**

|  |  |  |
| --- | --- | --- |
|  | **2018-2019 Proposed** | **TOTAL COSTS** |
|  |  |  |
| **PERSONNEL** |  |  |
| Student Assistants |  |  |
| Professional personnel (staff, consultant, etc) |  |  |
| Other, Please List |  |  |
|  |  |  |
|  | **Total for Personnel** | **0**  |
|  |  |  |
| **OPERATING** |  |  |
| Travel (itemize) |  |  |
|  |  |  |
|  |  |  |
|  | **Total for Travel** | **0** |
| Equipment (itemize) |  |  |
|  |  |  |
|  |  |  |
|  |  **Total for Equipment purchase**  | **0** |
|  | **Total for Equipment maintenance** | **0** |
|  |  |  |
| Supplies/Materials (itemize) |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **Total for Supplies /Materials** | **0** |
|  |  |  |
| **OTHER (LIST BELOW)** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **TOTAL** | **0** |