

PRELIMINARY FINANCIAL INFORMATION (Continuing Education Programs)

This information will be used to provide a 5-year Cash Flow Analysis to be included in the new program proposal. Once a preliminary financial analysis is completed, a follow-up meeting can be arranged to discuss any required changes prior to submitting the final version to the Director, Budget and Financial Strategy for approval. **Please allow 2 weeks for completion of preliminary financials.**

Proposed Program Name: _____

Program Type (diploma, certificate, etc.): _____

Associate Dean/Department: _____

Proposed Start-up Date (academic year & term): _____

Date Submitted: _____

INSTITUTIONAL RESEARCH

1. **Has the Institutional Research analysis on tuition and grant values been completed?** Yes/No
Please note: IR analysis on tuition & grant values must be submitted to Finance with this financial information in order to complete the New Program Proposal costing.

PROGRAM ENROLLMENT and DELIVERY SEQUENCE

2. **What is the projected enrolment for the 5-year period? See attached Excel Enrollment Timing spreadsheet.**

ADMINISTRATIVE REQUIREMENTS

3. **Please answer the following questions:**

Is a Program Specialist required? (if yes, please specify cost per semester needed) \$ _____ No Yes

Are other additional Support Staff required over and above the department's current staff? (if yes, specify Full-time or Part-time – if Part-time include number of hours per year and pay band level) No FT PT

STAFFING

4. **Enter PT cost (before benefits) for standard courses. Any non-standard courses will be entered on the Enrolment Timing spreadsheet.**

CE teaching cost per TCH	\$
FT teaching cost per TCH	\$
DE/ OntarioLearn Mohawk Hosted teaching cost per SCH	\$
OntarioLearn Other College Hosted teaching cost per Enrollment	\$

OPERATING BUDGET REQUIREMENTS

5. Please provide preliminary estimates of expenses related to the academic delivery of the program:

Operating Exp	Year 1	Year 2	Year 3	Year 4	Year 5
Equipment Maintenance	\$	\$	\$	\$	\$
Fees (Licensing, etc.)	\$	\$	\$	\$	\$
Lab materials	\$	\$	\$	\$	\$
Small Equipment	\$	\$	\$	\$	\$
Travel/PD costs	\$	\$	\$	\$	\$
Initial Advertising & Promo Materials	\$	\$	\$	\$	\$
Other (please specify – for instance a program refresh or review in later years)	\$	\$	\$	\$	\$

Note: Administrative expenses will be calculated in the final financial template based on a costing methodology.

CAPITAL REQUIREMENTS

6. What are the projected capital expenses/start-up costs for the program?

Operating Exp	Year 1	Year 2	Year 3	Year 4	Year 5
Capital Equipment – Information Technology	\$	\$	\$	\$	\$
Capital Equipment – Equipment & Furniture	\$	\$	\$	\$	\$
Capital Equipment – Major Equipment	\$	\$	\$	\$	\$
Capital Equipment – Vehicles	\$	\$	\$	\$	\$
Renovations	\$	\$	\$	\$	\$
Other (please specify)	\$	\$	\$	\$	\$

OTHER CONSIDERATIONS

7. Are there any financial considerations to be reflected in the program financials? (e.g. clustering programs, etc.)

Please e-mail the completed template to: nadine.williams-brown@mohawkcollege.ca

Preliminary financials will be prepared and e-mailed to you for review. Thank you