

## REQUEST TO CREATE OR MODIFY A NON-RESEARCH CENTER OR INSTITUTE

1. Check one of the following boxes:

- New non-research new center/institute
- Renaming existing non-research center/institute.

2. Proposed name of the center/institute: <Enter response here.>

3. Location of the center: <e.g., college, department, physical location>

4. Type of center: <e.g., academic teaching, academic support, external outreach>

5. The purpose of and activities that will be conducted by the entity. If the center performs multiple activities (teaching support, academic support, service, research), the approximate amount of time and resources spent on each activity annually should be estimated. Additionally, this should specifically align to the University's strategic plan and/or any participating department, college, or other unit's strategic plan. Attach as a separate appendix if appropriate.

<Enter response here, or indicate if this information will be delivered as an appendix.>

6. The administrative structure of the entity, including the person who will direct the activities of the entity and to whom the entity reports: <Enter response here.>

7. Funding source and estimated annual cost (include salaries, fringes, travel, supplies, course buy-outs etc.): <Enter response here.>

8. The process and frequency for reviewing the operations of the entity and its compliance with University policies and regulations: <Enter response here.>

9. The reason why the word "center" needs to be included in the name of the entity rather than a similar word (e.g., group, bureau, station, consortia): <Enter response here.>

10. If the center is created, provide approximately three (3) to seven (7) key performance indicators for the center annually, metrics to be used to determine whether the center is meeting its goals: <Enter response here.>

**This document is to be submitted and signed using [DocuSign](#). See "C&I Forms Submission Instructions" on the Faculty Affairs Policy and Procedures webpage for routing instructions.**

Signature Form

\_\_\_\_\_  
Director of Center/Institute <Date>

\_\_\_\_\_  
Dept. Chair/School Director <Date>

\_\_\_\_\_  
Dean or VP <Date>

\_\_\_\_\_  
Dean or VP (if needed) <Date>

\_\_\_\_\_  
AVP Faculty Affairs <Date>

\_\_\_\_\_  
Provost <Date>