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|  |  | **Responsible Party(s)** |
| **Funds Center Information:** | FC #\_\_\_\_\_\_\_\_\_\_\_\_- FLT (Budget Office will create and forward to responsible parties) |  |
| **Budget Submission Due Date:** |  |  |
| **Budget Monitoring:** |  |  |
| **Program Fee:** |  |  |
| **Program Fee Payment Schedule:** |  |  |
| **Other Fees/Costs:** |  |  |
| **Financial Aid Requirements:** |  |  |
| **Enrollment Target:** |  |  |
| **Contracting Requirements:** |  |  |
| **Miscellaneous:** |  |  |