General Description and Risk Review

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Chair Name** |  | | | |
| **Chair Type** |  | | e.g., Permanent Endowed Chair, Limited Term Chair. | |
| **Total Donation** | $ | | **Received over (# years)** |  |
| **Sponsoring Dean /College** |  | | **Department** |  |
| **Gift Agreement Drafted?** | Y/N | **Author** |  | |

|  |  |
| --- | --- |
| **Risk Review** | |
| **Project Benefits and Opportunities** | Summarize any opportunities for as a result of accepting these funds. E.g., in support of a specific IP Goal, how it strengthens or supports the University’s mandate and Strategic Areas. |
| **Project Costs and Risks** | Summarize any risks associated with acceptance of these funds e.g., ability to deliver, constraints, potential gaps created (financial or other resources/commitments), |

Funding and Commitment Summary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Total Donation** | **$** | **Received over (# years)**  **Attached financial plan if available** | |  |
| **For Endowment Funding** | | | | |
| **Value of Permanent Endowment** | **$** | **Year Completed** | |  |
| **Endowment Annual Payout** | **$** | **Payout Rate** | | **%** |
| **Total Annual Commitments** | **$** | **Over How Many Years** | |  |
| **Describe main direct commitments** | e.g., Tenure track faculty salary or portion | | | |
| **Are there any funding commitments greater than gift?** | *If yes, explain how these are to be covered with the College/unit budget.* | | | |
| **For Limited Term Funding** | | | | |
| **Total Term Contributions** | **$** | **Over How Many Years** |  | |
| **Total Temporary Commitments** | **$** | **Over How Many Years** |  | |
| **Describe nature of direct commitments** | e.g., Tenure track faculty salary or portion | | | |
| **Total Base Commitments** | *Are there any University base commitments beyond the Term of the gift? How are these to be covered?* | | | |
| **Are there any funding commitments greater than gift?** | *If yes explain how these are to be covered with the College/unit budget.* | | | |

Approvals

|  |  |  |  |
| --- | --- | --- | --- |
| **APPROVALS:**  **The undersigned certify that the gift agreement meets all the requirements of, and is consistent with, the University’s Policy on Endowed Chairs;** | | | |
| **Prepared by** |  | **Date** |  |
| **Dean or Division Head** |  | **Date** |  |
| **AAD** |  | **Date** |  |
| **Provost/VP Academic** |  | **Date** |  |