

Attachment 9 - TEMPLATE B: Five-year Budget Projection of Financial Viability for Planned Nursing Education Program (NEP)

Instructions

Completion of the NEP Budget is a requirement for all new nursing education program . Incomplete or vague responses will delay the processing of your application as completion or clarification will be requested. The NEP Budget provides the Board with all details on areas that will impact the financial success of a new NEP as well as guidance to potential areas that may be overlooked when starting a NEP.

New Nursing Education Program Financial Requirements

Each new nursing education program applicant is required to submit the following minimum financial requirements:

- 1) Business Plan
- 2) Profit & Loss Proforma

If applicants are having difficulty understanding or completing any part of the NEP Budget documents, they are strongly encouraged to seek the guidance of a financial professional.

Refer to: www.dos.pa.gov/nurse for the Board's Rule & Regulations

Professional Nursing Program Establishment Section 21.51

Practical Nursing Program Establishment Section 21.172

New Nursing Education Program Business Plan

Business Plan Summary

Program Name:

Program Overview

Briefly describe the purpose / goals of your Program (both short and long term):

Program Information

Anticipated start date of first class

(Must enter as mm/dd/yy)

	Length of Program (in weeks)	Gross Tuition	# of Starts in First Year	# of Student per Start	Total # of Starts 1st Year
Name of program offered at Start-up					
(1)	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 100%; height: 60px; background-color: #ffff00;" type="text"/>
(2)	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	
(3)	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	<input style="width: 80%; height: 20px; background-color: #ffff00;" type="text"/>	
Total					

Future Program Considerations:

Facilities (Include floor plan of facility with Application submission)

Is the building owned or leased?	<input type="text"/>				
What is the max # of students your school can serve?	<input type="text"/>				
If leased, what is the length of the lease (in years)?	<input type="text"/>				
Size of location	# of Rooms	Sq Footage			
Classrooms	<input type="text"/>	<input type="text"/>			
Labs - Computer	<input type="text"/>	<input type="text"/>			
Labs - Other*	<input type="text"/>	<input type="text"/>			
Administrative/Other	<input type="text"/>	<input type="text"/>			
* Includes medical labs, garages, kitchens used for instruction, etc.)					

<u>Shift Information</u>			# of Rotations	Days	Hours (to-from)
Morning	<input type="text"/>				
Afternoon	<input type="text"/>				
Evening	<input type="text"/>				
Weekend	<input type="text"/>				
Other	<input type="text"/>				

Staffing (expected at Start Up)

	# of Staff			# of Staff	
	Part Time	Full Time		Part Time	Full Time
School Director	<input type="text"/>	<input type="text"/>	Faculty	<input type="text"/>	<input type="text"/>
Admissions	<input type="text"/>	<input type="text"/>	Coordinators	<input type="text"/>	<input type="text"/>
Financial Aid	<input type="text"/>	<input type="text"/>	Program Directors	<input type="text"/>	<input type="text"/>
Career/Student Services	<input type="text"/>	<input type="text"/>	Registrar	<input type="text"/>	<input type="text"/>
Bursar/Accounting	<input type="text"/>	<input type="text"/>	Other / Administrative	<input type="text"/>	<input type="text"/>
			Total Staff	<input type="text"/>	<input type="text"/>

Capital Equipment

		Cost	Useful Life (Years):
Building - if leased, monthly rent:	<input type="text"/>	If owned, cost:	<input type="text"/>
Building / Leasehold Improvements (Fit-out Costs)		<input type="text"/>	<input type="text"/>
Furniture / Fixtures		<input type="text"/>	<input type="text"/>
Office Equipment (computers, servers, fax machines)		<input type="text"/>	<input type="text"/>
Classroom Equipment (lab equipment, instructional equipment)		<input type="text"/>	<input type="text"/>
Goodwill		<input type="text"/>	<input type="text"/>
Curriculum		<input type="text"/>	<input type="text"/>
Other Fixed Assets	Describe: <input type="text"/>		Cost: <input type="text"/>

Capitalization / Ownership Structure

Type of Organization (e.g. Corporation, LLC, Not-for-profit 501(c)(3), etc.)	
How will the capital investment be made? (stock, loan, other capital, etc.)	
Who will be the major stakeholders? (please list parent company name, individual(s) names, etc.)	
Other Financial Resources Available to Sustain the school (e.g. Letter of Credit, etc.) please describe:	

Other Business

Is other business conducted at the program?	
If answered Yes to either question, briefly describe the activities (include contracted training):	

Accreditation

Will accreditation be pursued?	
Accrediting Body?	
Anticipated approval date	

Advertising / Marketing Plan

Please describe plan for recruiting students (describe type of media used to advertise, geographic area targeted, average demographic of student, etc.)

[Yellow response area]

Student Funding / Accounts Receivable (Attach all Policies to Application)

Is Title IV Aid anticipated?

How will most students be financing their education?

[Yellow response area]

Will the school be extending students credit / offering payment plans? (Yes / No)

If yes, please describe the terms of the loan / payment plans (including what services, if any, will be withheld):

[Yellow response area]

Briefly describe procedures / policies for collecting accounts receivables (i.e. call, letter, collection, dismissal, etc.):

[Yellow response area]

Briefly describe all financial aid policies and procedure relating to scholarships, loan, and grants.

Refund Policy

Please describe your refund policies governing fees and tuition paid by students :

Cost of Attending (COA) vs. Starting Salary/Student Loans

Program being Offered	Tuition	Fees*	Total Cost of Attndg	Estimated Stdn Loans
(1)				
(2)				
(3)				

	Std n Loans vs. Starting Salary

*Fees include **ALL** other fees, expenses, costs the student is expected to pay the school for items such as uniforms, equipment, books, lab fees, graduation fees, etc. If the fees are paid each semester, calculate the total cost for a student's attendance at the school for the entire program. For the purposes of this schedule, base the fees on a full time student attending during the day.

Affiliations

Will any Federal or State job training funds be used (e.g. Workforce Investment Act)?

If yes, please describe (include current status, length of agreement(s), limits on enrollments/funding, etc.):

Please describe any other affiliations / related party relationships (e.g. donors, charitable organizations, etc.) and the impact on your organizations (e.g. free rent, donation of equipment, etc.):

Please check here if additional information is being attached / enclosed



Additional Information Attached

Name of Person completing the form:

Affiliation with the school:

Address of Person Completing Form:

Director:

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Date

By placing my name above, I certify that the information contained in this application is accurate and true.

END OF FORM - PROCEED TO NEXT TAB

New Nursing Education Program Budget

Profit and Loss Statement for Year 1 through 5

	1st Year of Operation												Total	2nd Year of Operation												Total	3rd Year of Operation												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Student Population (enter all #'s as positive)	Enter First Start Here													Enter First Start Here													Enter First Start Here												
Enrollment Population	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Revenue													0													0													0
Tuition													0													0													0
Fees													0													0													0
Application													0													0													0
Books/Supplies													0													0													0
Health/Physical													0													0													0
Placement													0													0													0
Graduation													0													0													0
Other Fee (please specify)													0													0													0
Other Revenue													0													0													0
Total Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Expenses													0													0													0
Administrative Expense													0													0													0
Salaries													0													0													0
Benefits													0													0													0
Travel and Entertainment													0													0													0
Postage													0													0													0
Telephone													0													0													0
Stationery & Supplies													0													0													0
Equipment (non-Capitalized)													0													0													0
Franchise Fees													0													0													0
Dues & Subscription													0													0													0
Accreditation													0													0													0
Accounting Fees													0													0													0
Licenses/Permits													0													0													0
Bank Fees													0													0													0
Debt Servicing Costs													0													0													0
Depreciation / Amortization													0													0													0
Building													0													0													0
Buildings / Leasehold Improvements													0													0													0
Furniture / Fixtures													0													0													0
Equipment													0													0													0
Classroom Equipment													0													0													0
Goodwill													0													0													0
Curriculum													0													0													0
Bad Debt													0													0													0
Bad Debt Reserve													0													0													0
Bad Debt Charge-Offs													0													0													0
Collection Costs													0													0													0
Loan Costs													0													0													0
Advertising													0													0													0
Internet													0													0													0
Newspaper/Magazines													0													0													0
Television													0													0													0
Radio													0													0													0
Other (describe)													0													0													0
Student Recruitment (Admissions)													0													0													0
Salaries													0													0													0
Benefits													0													0													0
Supplies													0													0													0
Printing													0													0													0
Referral Fees													0													0													0
Transcripts													0													0													0
Instructional Salaries and Expenses													0													0													0
Salaries													0													0													0
Benefits													0													0													0
Supplies (include all classroom, lab and instructor supplies)													0													0													0
Library Supplies													0													0													0
Reference Materials													0													0													0
Equipment													0													0													0
Training & Development													0													0													0
Dues & Subscriptions													0													0													0
Dues & Subscription - Library													0													0													0
Occupancy													0													0													0
Building - Rent													0													0													0
Building - Mortgage													0													0													0
Insurance													0													0													0
Utilities (electric, gas, water, sewer, etc.)													0													0													0
Real Estate Taxes													0													0													0
Security													0													0													0
Student Personnel Services													0													0													0
Salaries													0													0													0
Benefits													0													0													0
Travel & Entertainment													0													0													0
Supplies													0													0													0
Placement Fees													0													0													0
Student Activities													0													0													0
Other Support													0													0													0
Other Expenses (describe)													0													0													0
Total Expenses	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Taxes													0													0													0
Federal													0													0													0
State													0													0													0
Local													0													0													0
Total Taxes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
NET Income	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

Name of Person completing the form: _____
 Affiliation with the school: _____
 Address of Person Completing Form: _____

Program Director: _____ Date: _____

By checking my name above, I certify that the information contained in this application is accurate and true.
 Please check here if additional information is being attached / enclosed Additional Information Attached

