**Budget Explanation Form**

**Office/Department:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fiscal Year**:  **2018 ODD #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submitted by:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Deputy/Assoc. Superintendent Date**

***Instructions****:* ***Please respond to the following questions based on the combination of ODDs displayed on the FY 2017 Operating Budget Resource pages (Appendix L) and limit your responses to no more than two pages. Additional material may be presented as attachments and backup. The Budget Resource Worksheet (Appendix E) should show the cost details of each proposal.***

Briefly describe significant changes and their alignment with system priorities as well as their anticipated impact (on programs, services, employees, and students). Please include the overall amount and the number of full-time equivalent positions. Cost details and calculations are to be provided on the Budget Resource Worksheet (Appendix E). Please note, not every ODD will require a Budget Explanation Form.

**A4. Realignments:**

**B5. Growth:**

**C6. Rate Changes:**

**D7. Efficiencies/Reductions:**

**E9. Enhancements:**

**F10. Other Efficiencies:**