

The Southern Baptist  Theological Seminary

Proof of Concept Form

**All proofs of concept must be submitted to Andy Vincent in Carver 217 or [avincent@sbts.edu](mailto:avincent@sbts.edu)**

The “Proof of Concept” (POC) is designed to document specific supporting arguments and provide relevant context for a proposed personnel, operating or capital request. The information you provide will be used to determine allocation of resources for the upcoming budget year and provide accountability for the proposed request. **Approved POCs that have been implemented but are found to not meet or exceed their projections will be defunded.**

When contemplating your request, please be sure it:

- Is missional
- Supports the current institutional priorities
- And/or provides new or increased revenue

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Department: \_\_\_\_\_

POC Title: \_\_\_\_\_

**Required Signatures**

Requesting Budget Manager \_\_\_\_\_ Date \_\_\_\_\_

Department Dean or VP \_\_\_\_\_ Date \_\_\_\_\_

# Proof of Concept Financial Summary

POC Title: \_\_\_\_\_

**Operating Expense** **Total** \_\_\_\_\_

## Personnel Expense

Salary \_\_\_\_\_

Benefits *\*assume \$16,500 for full-time and 7% for part-time* \_\_\_\_\_

Operating Supplies \_\_\_\_\_

Travel \_\_\_\_\_

Other \_\_\_\_\_

(Less internal funding available) \_\_\_\_\_

**Total Personnel Expense** **\$** \_\_\_\_\_

## Capital Expense

Office Furnishings - assume \$2000 per desk, \$500 per chair \_\_\_\_\_

Computer & Other Technology - assume \$600/computer, \$200/phone \_\_\_\_\_

Building Modifications - contact Operations for cost estimates \_\_\_\_\_

Equipment \_\_\_\_\_

Other \_\_\_\_\_

**Total Capital Expense** **\$** \_\_\_\_\_

## Operating Request

Initiative Title: \_\_\_\_\_

1. Describe the new initiative.
2. Budget Impact
  - a. Estimate the total cost of the new initiative for the first budget year. *(Please provide detail of your calculations.)* Enter total on Financial Summary Sheet.
  - b. Identify funds within your current budget to be given up or allocated to help fund this proposed initiative. *(List specific account numbers and dollar amounts you plan to contribute to this request.)*
  - c. Estimate the revenue projection (if any) the new initiative will provide for the first budget year and beyond.
3. Justification
  - a. Identify the positive impact on your department, division, and the institution.
  - b. Identify the risks and negative impact this request could have on your department, division, and the institution.
  - c. Will this initiative require a contractual obligation? If so, what is the estimated contractual obligation amount and term?
  - d. Provide a timeline for implementation.
  - e. Define an exit strategy.
4. Provide any additional comments or information that can better clarify your request.

## Personnel Request

Position Title: \_\_\_\_\_

1. Attach the position description and completed Financial Summary Sheet.
2. Budget Impact
  - a. Identify funds within your current budget available to be allocated to this position. (*List specific account numbers and dollar amounts you plan to contribute to this request.*)
  - b. Estimate the revenue projection (if any) the new position will provide for the first budget year and beyond.
3. Justification
  - a. Describe the anticipated benefits this position will provide to the department and the institution.
  - b. Identify the risks and negative impact this request could have on your department, division, and the institution.
  - c. Provide a timeline for implementation.
  - d. Define an exit strategy.
4. Provide any additional comments or information that can better clarify your request.

**\*If you have questions or need any help navigating the personnel process, please contact the HR Director, Rich McRae [rmcrae@sbts.edu](mailto:rmcrae@sbts.edu) or x 4721.**