**POLICY ON ANCILLARY UNITS**

1. **PURPOSE**

Campuses of the California State University are authorized to create entities usually known as centers, institutes, ancillary units, bureaus, clinics, laboratories, research groups, councils, field stations, consortia, and similar organizations. For the purposes of this policy, the term “Ancillary Unit” shall be taken to include all of the aforementioned types of organizations. The following policy applies to all Ancillary Units currently established as well as those to be developed in the future.

Generally such units operate outside the direct instructional mission of the university but are designed to enhance the mission of the university. While Ancillary Units do not have the primary purpose of offering instruction, the activities of Ancillary Units may be related to instructional programs and objectives. They may or may not expect to generate resources through grant or contract activities. In some instances scholars from several fields of study may wish to express their joint scholarly interests and relationships in the more formal setting of an Ancillary Unit.

California State University, Fresno’s Ancillary Units are intended to enhance and extend the university’s academic programs by focusing attention and effort on specific programmatic objectives. Ancillary Units shall meet at least one of the following criteria:

a. enhance faculty research and scholarship;

b. promote the programs of the university; or

c. promote and provide for public service programs.

**II. ORGANIZATION AND REPORTING**

1. Each center, institute, and Ancillary Unit is required to:

a. have a clearly stated set of objectives;

b. have a clear relationship to the mission of an existing university program;

c. be housed administratively within an existing department, program, school/college or division;

d. have a standing advisory committee chaired by a faculty member other than the unit’s director that will participate in setting the unit’s goals and objectives and in evaluating its effectiveness; and

e. submit an annual report.

2. Normally Ancillary Units report to a college/school dean or division head.

**III. CRITERIA FOR ESTABLISHING AN ANCILLARY UNIT**

Each Ancillary Unit shall:

1. contribute to the fulfillment of the mission of the California State University and California State University, Fresno;

2. incorporate accepted standards of academic research including being subject to peer review;

3. conform with all applicable laws and regulations and with system wide and university risk management policies.

**IV. APPROVAL OF AN ANCILLARY UNIT**

**1. The application for approval of a new Ancillary Unit shall include each of the following:**

a. A clear statement and delineation of purpose of the proposed Ancillary Unit, which includes a description of how the activities of the unit are intended to contribute to the accomplishment of the purpose and functions of the affiliated academic unit and the university.

b. A clear statement of how the Ancillary Unit will be housed administratively within an existing department, program, College/School or division, and a description of how this unit will function organizationally, including its proposed organizational structure, how responsibilities will be assigned, and descriptions of any anticipated relationships with public or private agencies or organizations.

c. A description of the proposed advisory committee1, and its intended functions and responsibilities

d. A description of how accepted standards of academic research including being subject to peer review will be incorporated into the responsibilities of the unit.

e.

f. A statement on how the unit conforms to systemwide and university policies and procedures including risk management policies.

g. A projected budget of revenues and expenditures; and a detailed listing of anticipated resources required for the successful operation of the proposed unit, including space and equipment , technology support, and faculty assigned time,2

1 The President appoints the membership of all advisory committees.

2 If assigned time for faculty is desired, prior agreement by the Provost and Vice President for Academic Affairs is required.

**2. PROCEDURES FOR APPROVAL OF ANCILLARY UNITS**

a. A proposal to establish a new Ancillary Unit will be reviewed by the department chair, by the dean of the school or college, forwarded to the Provost and Vice President for Academic Affairs, and then to the President for approval.3 In circumstances where an Ancillary Unit is housed within a college, division, or the Office of the Provost, the supervising administrator will review and forward the proposal

b. Final approval to form or continue an Ancillary Unit resides with the President. Newly afour

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**V. ANNUAL REPORTS**

1. Annual reports shall be addressed to the President and submitted with the attached cover sheet to the department chair, who in turn will forward the report to the dean of the school or college, who in turn will forward it to the Provost and Vice President for Academic Affairs. In the exceptional circumstance that an Ancillary Unit is housed within a college, division, or in the Office of the Provost, the supervising administrator will review and forward the annual report. Copies with all signatures and recommendations will then be forwarded to the President.

2. Annual reports shall be based on the fiscal year July 1 through June 30 and shall summarize the activities of the unit. The a

3 For the purposes of this document, “department chair” shall mean the department chair or program coordinator.

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a. A description of the year’s activities;

b. Numbers of on and off campus participants;

c. An evaluation of the effectiveness of these activities;

d. The unit’s financial statement;

e. ;

Space and equipment utilization;

f. Changes in advisory committee membership and/or changes in governing policies;

g. The following year’s goals and objectives; and

5.

3. Annual reports for all units are due no later than August 1 following the conclusion of the fiscal year.

**VI. PERIODIC REVIEWS**

1. The President or his/her designee may require the review of an Ancillary Unit at any time.

2. New Ancillary Units shall be reviewed in the fourth year of their probationary period. After this initial review, Ancillary Units will be reviewed every seven (7) years.

 a. A review committee will be formed by the appropriate dean or division head.

 b. The Ancillary Unit will provide a self study addressing requirements listed in section IV.A and copies of last two (2) years annual reports.

3. Should an Ancillary Unit decline dramatically in activity, violate university policies, and/or fail to submit an annual report, it may be terminated or its status may be changed to inactive.

4. The designation of inactive status can last for up to three years before termination of the Ancillary Unit will be considered. At the close of that time period, it will either be reinstated to active status or discontinued.

**Reference:** CSU Executive Order 751

Recommended by the Academic Senate March 2001

Approved by the President March 24, 2001

**ANCILLARY UNIT STATUS FORM**

Name of Ancillary Unit:

Director of Ancillary Unit:

Department & College / School / Division:

 New Application

Applying for Initial Approval *(See APM 110)* [*http://www.csufresno.edu/aps/apm/110.pdf*](http://www.csufresno.edu/aps/apm/110.pdf)

 Annual Report

Enclosed

**ASSIGNED TIME:** Is assigned time involved for faculty in your department or program?  Yes  No

Name of Faculty Member Semester Assigned Number of WTUs

|  |  |  |
| --- | --- | --- |
|  Assigned Time Approved | X  |  |
|  Assigned Time Not Approved | Signature of Department Chair / Program Coordinator | *Date* |

|  |  |  |
| --- | --- | --- |
|  Assigned Time Approved | X  |  |
|  Assigned Time Not Approved | Signature of Dean | *Date* |

**ADDITIONAL SIGNATURES:**

If assigned time is given to faculty and/or staff outside the Ancillary Unit’s home department, please list the individual’s name below, the amount of assigned time granted, and obtain the signatures of the individual’s Department Chair and Dean. **Please attach additional signatures if necessary.**

Name: Home Dept: Dept Chair:

X

Semester & WTUs: Home College/School: Dean:

X

*Dept. Chair’s Signature & Dat*e *Dean’s Signature and Date*

**WORKSHOPS / NON-CREDIT COURSES / CERTIFICATES:**

**Centers/ Institutes cannot offer courses for university credit**. Please identify all non-credit courses and any certificates offered by the unit. Attach additional pages if necessary.

**APPROVALS:**

**Chair,** Recommend Approval?  Yes  No **Dean,** Recommend Approval?  Yes  No

X X

*Dept. Chair’s Signature & Dat*e *Dean’s Signature and Date*

**Provost and Vice President for Academic Affairs,** Recommend approval?  Yes  No

X

*Provost’s Signature Dat*e

**President:**  Approved, 1Year  Approve Continued Developmental Period  Not Approved

 Other

X

*President’s Signature Date*